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CITY OF CHICHESTER

ANNUAL REPORT

ON THE STATE OF THE

PUBLIC HEALTH

OF THE

CITY OF CHICHESTER

For the year 1954

BY

H. MICHAEL AYRES

Medical Officer of Health



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Members of the City Council at 31st December, 1954:-

Alderman MRS. A. F. EASTLAND, J.P. (Mayor)

H. U. B. BURDEN (Deputy Mayor)

T. J. EASTLAND, M.B.E., J.P. . .

C. J. NEWELL ,,

G. A. R. PURCHASE ,,

F. E. WORLEY

N. BARRY Conneillor

W. BROOKES

M. L. EVANS ,,

L. E. EVERSHED-MARTIN

G. FOOTE

,,

MRS. J. HOGG A. E. HUMPHRY

,, H. A. MASON ,,

W. G. S. POPE

F. REED ,,

,,

,,

,,

,,

,,

S. H. J. ROTH

J. M. SELSBY

J. G. SNELLING

S. D. SPICER

R. O. STEWART

E. W. TOZER ,,

G. J. WELCH J. P. WHITEHEAD

The Committees chiefly concerned with matters of public health are follows:-

Committee.

Public Health and Housing Committee:

(details of whose membership are shown below)

Highways Committee: (b)

(a)

Sewerage and Waterworks (c) Committee:

Functions.

- General public health matter.
- Housing Public Mortuary Public conveniences
- Street cleansing
 - Refuse collection and dispose
- Sewers
- Sewage disposal
- Cesspool emptying
- Water supply

Public Health and Housing Committee at 31st December, 1954:-

Alderman MRS. A. F. EASTLAND, J.P. (Mayor) Councillor L. E. EVERSHED-MARTIN (Chairman)

Alderman H. U. B. BURDEN C. J. NEWELL

Councillor N. BARRY

,,

W. BROOKES

F. REED ,,

J. M. SELSBY

E. W. TOZER

G. J. WELCH

PUBLIC HEALTH OFFICERS OF THE CITY

Officers

Other Appointments and Duties

H. MICHAEL AYRES

(Member of the Royal College of Surgeons (Eng.), Licentiate of the Royal College of Physicians (Lond.), Diploma in Tropical Medicine and Hygiene (Camb. Univ.), Diploma in Public Health (Camb. Univ.).) Medical Officer of Health

Medical Officer of Health, Bognor Regis Urban District; Assistant County Medical Officer of Health and School Medical Officer;West Sussex County Council; Medical Superintendent, Chichester Infectious Disease Hospital.

T. C. WARD

(Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board as Sanitary Inspector, and Certificate of the Royal Sanitary Institute as an Inspector of Meat and Other Foods.) Chief Sanitary Inspector. Housing Inspector; Inspector under the Prevention of Damage by Pests Act 1949; Inspector under the Public Health (Meat) Regulations.

C. W. CHAPMAN

Chief Clerk

K. T. ASTON

(Certificate of Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board as Sanitary Inspector, and Certificate of the Royal Sanitary Institute as an Inspector of Meat and Other Foods.)

Additional Sanitary Inspector (Appointed 17/5/54)

W. H. J. OSMAN

Shops Inspector (Part-time).

A. T. WHITE

Rodent Operative/Disinfector/General Duties

CLERICAL STAFF

Senior Clerk—Housing:

MR. L. J. MARVIN

Assistant Clerks:

MISS I. M. PIERCE

MISS B. M. TWEEDY (Resigned 4/1/54)

MRS B. A. MOFFATT (Appointed 15/2/54

PUBLIC HEALTH DEPARTMENT, "GREYFRIARS," NORTH STREET, CHICHESTER.

July, 1955.

To the Chairman and Members of the Public Health and Housing Committee.

Mr. Mayor, Mrs. Eastland and Gentlemen.

I have the honour to present my thirteenth Annual Report on the health of the City of Chichester and the work of the Public Health Department during the year 1954. This has been compiled, in accordance with Ministry of Health Circular 28/54, on the lines of the previous year's report.

The very high standard of health shown by the statistics for 1953, and previous years has been generally maintained, and in some instances actually improved upon.

I wish to draw your attention to the following indices of the general state of the health of the City, but I would ask you to remember that in a City such as Chichester, with a relatively small population, a slight variation in the number of births, deaths and infant deaths, etc., will tend to be reflected disproportionately in the resultant rates per 1,000.

1. BIRTHS AND BIRTH RATE.

There has been an *increase in births* from 271 in 1953, to 291 in 1954, the rates being respectively 14.05 and 15.3 per 1,000 of the population.

The Registrar General has this year again supplied an Area Comparability Factor for births, which allows for the differing age and sex distributions of the population in different areas, and enables a more accurate comparison to be made between the birth rate for Chichester City and that for England and Wales (see pages 15 and 16).

The birth rate for the City for 1954, when adjusted by the comparability factor, is increased from 15.3 to 15.6 per 1,000 of the population.

The birth rate for England and Wales was 15.2 in 1954 compared with 15.5 in 1953.

2. DEATHS AND DEATH RATE.

There was an *increase* of 24 in the number of deaths from 276 in 1953, to 300 in 1954, the crude death rates (i.e. the unadjusted death rate) being respectively 14.31 and 15.78 per 1,000 of the population.

The death rates for England and Wales were 11.4 per 1,000 of the population in 1953, and 11.3 in 1954.

The Registrar General has again supplied an Area Comparability Factor for deaths and it is therefore possible to compare the death rate of a City such as Chichester, which tends to have a more aged population (because it attracts retired persons) with the death rates of the country as a whole (see page 17).

The death rate for Chichester City for 1954, when adjusted by the area comparability factor, is *reduced* from 15.78 to 12.3.

It is of interest to note that 75% of the deaths in 1954 in the City were of residents aged 65 and over, whilst 51% were aged 75 and over.

Other information regarding deaths is set out below:-

(a) Infantile Mortality.

The number of deaths of infants during the first year of life was again very low, namely 3, compared with 4 in 1953. (The City infantile mortality rate per 1,000 live births was 10.30 compared with 25.5 for England and Wales for 1954).

(b) Maternal Mortality.

It is gratifying to report that there were no deaths registered in 1954 as being due to maternal causes.

(c) Death Rate from all forms of Tuberculosis.

Deaths from Tuberculosis showed an increase in 1954, the total being 4 (2 pulmonary, 2 non-pulmonary) as compared with 2 (both non-pulmonary) in 1953. None of the deaths was among young persons, in fact all were long-standing older cases.

(d) Cancer Death Rate.

Deaths from cancer in 1954 showed a slight decrease, the figure being 45, as compared with 49 in the preceding year. The respective death rates per 1,000 population were 2.36 in 1954 and 2.54 in 1953.

3. CONTROL OF INFECTIOUS DISEASE.

It is again highly satisfactory to be able to report that 1954 was a year free from any serious outbreaks of infectious disease. Apart from tuberculosis the only deaths which occurred were one from Acute Poliomyelitis and one from Scarlet Fever (with broncho-pneumonia).

For the first time since 1947, a case of Diphtheria was notified—a man of 40, who had not been immunised. The case was of a very obscure type, but he eventually recovered.

Measles notifications during the year numbered 4 only, as compared with 350 in 1953. (This disease reaches epidemic proportions in alternate years).

Whooping Cough notifications also decreased, from 55 in 1953 to 30 in 1954.

Scarlet Fever cases notified increased from 15 in 1953 to 41 in 1954 (one case being subsequently re-diagnosed as not Scarlet Fever). The disease is now extremely mild in type. Most of the cases occurred during March and April amongst children under 10, at two schools in the City. One death, however, occurred at the end of the year, the patient, a girl of 6, contracting bronchopneumonia as a subsequent complication.

Poliomyelitis. No cases were notified during the year. One death occurred during 1954 from the disease—the patient having had prolonged hospital treatment since the original notification in 1953.

There were 5 notifications of Acute Primary Pneumonia (11 in 1953), whilst no cases of Food Poisoning were notified in 1954, compared with 9 in the previous year.

4. DIPHTHERIA IMMUNISATION.

Diphtheria Immunisation statistics in respect of the City are set out in Section III of this Report. The remarkable success of the nation-wide immunisation campaign is clearly shown in the dramatic drop in the numbers of notifications of, and deaths from diphtheria since the campaign was inaugurated, (from over 18,500 notifications and 722 deaths in England and Wales in 1945, to a record low (provisional) figure of 182 notifications and only 9 deaths in 1954).

It is, however, only too apparent from the present low level of protection against diphtheria over the country as a whole, especially amongst young children under school age, that the very success of the immunisation campaign has lulled parents into a false sense of security.

It cannot be too strongly emphasised that the elimination of diphtheria in this country can only be achieved if an adequate level of immunisation, particularly amongst young children, is maintained.

Two hundred and sixty-eight children were immunised in the City for the first time during the year compared with a total of 172 in 1953. In addition, 302 children under 15 received secondary (reinforcing) injections during the year.

All parents are strongly urged to take advantage of the facilities offered to secure protection for their children against diphtheria.

5. HOUSING.

Despite a restricted allocation by the Ministry of Housing and Local Government 100 new houses were completed by the Council during 1954 (the figure for 1953 was 142). This brings the total of post-war construction by the Council to 832, of which 782 were permanent houses. This is a very fine effort and compares most favourably with other housing authorities in West Sussex.

Although good progress has been, and still is being made in the rehousing of families on the Council's housing waiting list, the number of applicants at the end of 1954 was still large (455, compared with 504 at the end of the previous year). Of these, 224 were people living in lodgings in the City and 91 were

City householders, making a total of 315 applications from actual residents in the City. There were, in addition, 64 requiring bungalows or ground-floor flats (mainly on grounds of age or infirmity) from elderly couples or single persons. Despite the completion, during 1954, of 24 old people's bungalows, the number of applicants in this category is increasing, and at the time of writing this Report it is standing at 72. Further provision for them is being made by the building of flats which are now under construction. With the very restricted allocation for 1955 for normal housing purposes, the problem of both elderly people and others on the waiting list gives rise to some concern, as the Council is now required to devote a substantial proportion of new construction to the rehousing of families who will be displaced from sub-standard houses in clearance areas.

I am indebted to the Committee for their most sympathetic co-operation in the rehousing of applicants for whom I have recommended additional points on medical grounds.

6. INSPECTION AND SUPERVISION OF FOOD.

This work has been carried out by the Chief Sanitary Inspector, Mr. T. C. Ward, with the assistance of Mr. K. T. Aston, the Additional Sanitary Inspector. Good progress was made during the year under review and, in general, ready co-operation was secured from the shopkeepers in the maintenance of satisfactory standards of hygiene in food premises. Full details of this work can be found in Section V of this Report.

7. RODENT CONTROL.

Treatment by the Department for rat and mice infestations at private dwelling-houses is carried out without charge, and house-holders are thus encouraged to notify the Council promptly, so that any work found necessary may be commenced without delay. Satisfactory results were obtained as a result of treatment carried out during the year, both at private and business premises as regards surface infestations, whilst systematic testing and baiting of the City sewers was also very successful.

8. WATER SUPPLY.

The water supplied to the City has once again been of a very high standard of purity. Mr. A. N. Burgess, the City Water Engineer, has very kindly furnished me with a report for 1954, on the undertaking, covering, amongst other points, a summary of the results of chemical and bacteriological examination of the water. I receive copies from the Water Engineer of all the reports on water samples, which are taken regularly, and there is close co-operation between the two departments.

9. HEALTH EDUCATION.

A number of talks have been given to organised bodies, including the Townswomen's Guild, Young Wives Groups, St. John Ambulance Nursing Division, Police, etc., and every opportunity is taken to distribute appropriate leaflets on Health Education.

10. GENERAL.

I wish to record my appreciation of the very large amount of excellent work which has been carried out during the year by the Chief Sanitary Inspector, Mr. T. C. Ward, his assistant, Mr. K. T. Aston, and the Shops Inspector, Mr. W. H. J. Osman.

I also have to record my thanks to the Chief Clerk, Mr. C. W. Chapman, and to the other members of the staff of the Public Health Department for their loyal and wholehearted service.

I again wish to express my deep appreciation of the keen interest taken in the health of the City by the Chairman and Members of the Public Health and Housing Committee, and by the Mayor, Aldermen and Members of the Council.

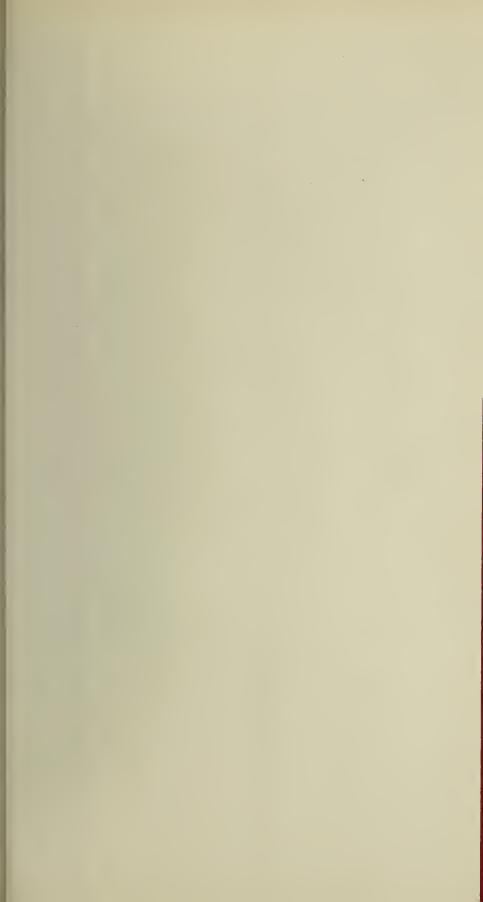
I am extremely indebted to the Town Clerk, Mr. Eric Banks, and the Chief Officers of other departments for their friendly and close liaison and assistance at all times. I am also grateful to local doctors and the members of the general public for their most ready and willing co-operation in matters of public health.

I am, M1. Mayor, Mrs. Eastland and Gentlemen,

Your obedient Servant,

H. M. AYRES,

Medical Officer of Health.



1914- -1954

	Popu-	Bir	ths	Dea	ths	Population Natural Increase or Decrease		fant rtality		ncer aths	Tul	nonary bercu- osis eaths	Deat Zy	th from motic sease	Attack	theria Attack	inhab- ited		erecte Sta Assis	ate tance	Rateable Value	Sum represented by Penny	Year
Year	lation	No.	Crude Birth Rate†	No.	Crude Death Rate†	No.	No.	Rate	No.	Rate	No.	Rate	No.	Rate	Rate	Rate	Houses ‡	Total	By Coun- cil	By Other Person		Rate‡	
1914 1915 1916 1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936	13110 10240 9962 9843 11851 12031 12200 12413 12560 12680 13010 13410 14090 14300 13850 13760 13760 13760 13912 14180 15240 15590 15770	227 207 225 220 181 205 289 244 235 213 188 186 181 223 198 199 229 205 206 198 236 223	17.31 15.78 23.52 20.05 15.27 17.7 24.3 19.70 18.71 16.79 14.45 13.87 12.84 15.59 14.29 14.46 16.64 14.72 14.52 12.99 15.13 14.14	260 300 .172 175 187 172 148 153 148 142 153 142 155 170 190 169 153 144 171 185 173 193 207	19.83 29.59 17.25 17.77 17.67 15.47 12.8 12.33 11.78 11.19 11.96 10.75 11.15 12.01 13.93 12.47 11.29 10.56 12.05 12.13 11.09 12.23 12.23	-33 -93 53 45 -6 33 141 91 87 71 35 44 26 53 8 30 76 61 35 13 63 30 2	12 26 16 11 11 21 9 15 14 9 7 9 5 8 12 10 10 6 11 10 7 11	52.86 125.60 71.04 49.94 60.72 121.95 44.9 61.47 59.57 42.25 37.23 48.38 27.62 35.87 60.60 50.25 43.66 29.26 53.39 50.50 29.66 49.32 9.56	17 12 11 22 18 20 27 14 22 19 22 22 30 19 16 29 19 25 29 26 32 38	1.2 1.2 1.1 2.2 1.5 1.6 2.2 1.1 1.9 1.7 1.5 1.6 1.3 1.1 2.1 1.3 1.7 1.8 1.6 2.02	7 14 15 10 15 10 12 15 13 8 6 5 8 8 10 6 3 8 5 9	0.53 1.3 1.5 1.01 1.2 0.83 0.98 1.2 1.03 0.63 0.46 0.37 0.56 0.55 0.72 0.41 0.21 0.57 0.35 0.59 0.32 0.37 0.56	3 10 1 2 3 5 4 1 Nil 2 Nil Nil Nil 2 2 2 Nil Nil 2 6 2	0.22 0.98 0.1 0.2 0.25 0.41 0.32 0.08 	3.96 6.34 4.1 2.03 1.3 6.6 0.9 0.9 1.35 0.15 0.23 1.1 1.7 3.4 2.8 2.9 2.6 1.2 0.98 5.7 2.5 3.1 1.3	2.7 1.8 1.6 2.1 5.1 1.5 3.1 2.4 0.8 0.63 0.07 0.29 1.4 2.02 1.8 0.72 0.58 0.32 0.56 0.32 1.2 5.6 1.8	2699 x x 2802 2805 2845 x 2647 2647 2647 2647 2647 2647 2647 3307 3351 3402 3854 4003 4148 4358	X X X X X X 3 27 10 X 25 118 110 98 37 27 27 X 51 102 120 171 302	x x x x x x x x x x 48 58 62 Nil	x x x x x x x x x x x x x 39 16 24 11 1 x Nil Nil Nil Nil	x x x x x x £59910 £60462 £60905 £62130 £63474 £64884 £64827 £66365 £95646 £90373 £91898 £94999 £97512 £109863 £123961 £127363	x x x x x x x x x x £220 £220 £220 £230 £240 £240 £252 £257 £257/4/8 £267/0/11 £377/10/2 £358/12/5 £368/14/3 £381/3/7 £429/10/0 £485/10/11 £500/11/11	1914 1915 1916 1917 1918 1919 1920 1921 1922 1923 1924 1925 1926 1927 1928 1929 1930 1931 1932 1933 1934 1935 1936
1936 1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947 1948 1949 1950 1951 1952 1953	15950 16370 16460 17530 18540 18270 17420 16490 15880 15890 16790 17120 17900 18020 18020 18020 19050 19020 19280 19010	209 239 227 245 241 263 275 308 285 272 301 311 329 301 293 245 263 271 291	13.10 14.59 13.79 14.62 12.99 14.39 15.78 18.67 17.95 17.11 18.46 18.16 18.38 16.75* 16.07 12.86 13.83 14.05 15.30	207 167 202 187 202 200 206 220 213 191 223 231 188 212 202 229 187 276 300	12.97 10.20 12.27 10.66 10.89 10.94 11.82 13.34 13.47 12.02 13.20 13.49 10.5 11.8* 11.08 12.02 9.83 14.31 15.78	2 72 25 58 39 63 69 88 72 81 87 80 141 89 91 16 76 — 5 — 9	10 7 12 12 8 12 15 19 6 9 10 3 7 5 4 5 4 3	9.50 41.84 30.83 48.58 49.79 30.41 43.64 48.77 66.66 22.05 29.03 32.15 9.12 23.26 17.06 16.33 19.01 14.76 10.30	36 34 34 24 27 28 32 23 34 35 38 28 37 26 38 40 49 45	2.3 2.07 2.06 1.3 1.5 1.5 1.8 2.0 2.1 2.2 2.3 1.6 1.84 2.06* 1.43 2.0 2.1 2.54 2.37	9 8 7 2 4 4 6 5 6 7 4 9 7 2 5 3 Nil 2	0.30 0.48 0.42 0.11 0.22 0.22 0.34 0.30 0.38 0.44 0.52 0.39 0.11 0.27 0.16 0.16 0.01	I Nil 4 Nil 1 1 6 2 Nil Nil Nil Nil Nil 1 Nil 1	0.12 0.06 	0.85 0.36 1.54 1.78 2.02 3.15 2.68 4.91 0.62 0.71 0.29 0.34 0.44 1.37 0.10 0.31 0.73 2.10	1.5 0.42 0.85 0.21 0.38 0.17 0.54 0.12 0.47 0.05 Nil Nil Nil Nil Nil Nil Nil Nil	4536 4524 4572 4758 4799 4277 4272 4276 4239 4243 4589 4666 4802 5020 5144 5175 5329 5121 5310	183 208 Nil Nil Nil Nil Nil Nil 87 227 137 38 88 96 185	Nil Nil Nil Nil Nil Nil Nil Nil Nil 13 62 192 114 15 74 70 142 100	Nil	£1273036 £133036 £140554 £1,43923 £153486 £156780 £157190 £158383 £159102 £159936 £159743 £162530 £160253 £168505 £171786 £174695 £179088 £182626 £187932	£527 £545/6/11 £591/3/7 £594/15/6 £624/15/11 £618/9/11 648/9/7 £646/10/6 £647/6/5 £637/19/0 £642/13/10 £661/3/0 £677/10/2 £670/6/4 £700/0/1 £718/18/5 £728/6/6 £748/9/0	1937 1938 1939 1940 1941 1942 1943 1944 1945 1946 1947

^{*} These have been calculated according to the civilian (only) population for 1949—17,970.

[†] Actual figure at 31st March x Information not available

[†] For explanation see under heading "Deaths" in body of Report.

TABLE II

Vital Statistics of Chichester compared with the Vital Statistics of the County of West Sussex, 1954

(Comparative figures for 1953 are shown in brackets)

	Urban Districts	Rural Districts	Adminis- trative County	Chichester
opulation estimated by Registrar-General	171,300	167,200	338,500	19,010
	(169,500)	(157,840)	(327,340)	(19,280)
umber of Live Births	2,101	2,580	4,681	29I
	(1,970)	(2,301)	(4,271)	(27I)
rth Rate	12.26	15.43	13.83	15.30*
	(11.62)	(14.58)	(13.05)	(14.05)
umber of Deaths	2,655	1,951	4,606	300
	(2,651)	(1,868)	(4,519)	(276)
eath Rate	15.50	11.67	13.60	15.78*
	(15.64)	(11.84)	(13.81)	(14.31)
umber of Deaths of Infants under 1 year	55	57	112	3
	(44)	(51)	(95)	(4)
afant Mortality Rate per 1,000 Births	26 (22)	22 (22)	2.4 (22)	10.3
umber of Maternal Deaths	(3)	(1) I	(4)	Nil (1)
aternal Mortality Rate per 1.000 Births	(1.48)	o.38 (o.43)	0,20 (0.92)	Ni1 (3.6)
umber of Deaths from Tuberculosis	30 (11)	13	43	2
(Respiratory System)		(15)	(26)	(Nil)
eath Rate from Tuberculosis (Respiratory	0.17	0.08 (0.10)	o.13	0.10
System)	(0.06)		(o.08)	(Nil)
umber of Deaths from Cancer	481	3 ⁸ 4	865	45
	(476)	(33 ⁶)	(812)	(49)
-ath Rate from Cancer	2.80	2.30	2.55	2.37
	(2.81)	(2.13)	(2.48)	(2.54)

It will be noted that in the Urban Districts Deaths exceeded Births by 554, whilst in the Rural Districts Births exceeded Deaths by 629. In the Administrative County, as a whole, Births exceeded Deaths by 75. In Chichester, Deaths exceeded Births by 9.

STATISTICS FOR ENGLAND AND WALES

Birth Rate			15.2	(15.5)
Death Rate			11.3	(11.4)
Infan Mortality	Rate		25.5	(26.8)
Death Rate fro	m Tuberci	ulosis		` ′
(Respirator	y System)		0.16	(0.18)
Cancer Death R	ate		2.03	(1.90)

^{*}The Death Rate and Birth Rate for the City are "crude" rates, i.e. not adjusted for age and sex distribution of population for comparison with other areas.

SECTION I.

Birthe .

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

1.—General Statistics

Area in acres							 2,873
Population (Census							 14,902
Population (Census				•••		•••	 19,127
Registrar-General's							 19,010
Number of inhabite						irch, 1954	 5,310
Rateable Value			(at 31st Ma				 £187,932
Sum represented by	y a penny	rate	(at 31st Ma	rch, 195	4)		 £748/9/0

2.—Social Conditions

The City is chiefly a residential and administrative centre, with the outlying parts agricultural. It lies in the coastal plain of West Sussex, between the South Downs and the sea, which is some 7 miles from the centre of the City.

Industries are varied in nature and not concentrated in any one sector, apart from the new Industrial Estate being developed by the Council to the south of the Portsmouth-Brighton railway line. There are no large industries which might have a prejudicial effect on the health of the City's inhabitants.

3.-Extracts from Vital Statistics of the Year

Males Females Total

Birtns:			Maies	Females	1 otat	n n .		
Live Births—						Birth Rate		
Legitimate		• • •	151	129	280	estimated r	esider	it popula-
Illegitimate			7	4	ΙΙ	lation:—		
						Crude		15.3
			158	133	291	Adjust	$_{ m ed}$	15.6
						•		
						(The figure	for Er	igland and
						` Wales w	as	15.2
Still Births—						Rate per 1	.000	total (live
Legitimate			4	5	9	and still-bi		36.4
Illegitimate	***		2		2		,	J 1
megremate	•••	• • • •				(The figure	for En	gland and
			6	5	ΙI	Wales was		24.0
						Wales Was		
Deaths :—			139	161	300	Death Rate		
							i resid	lent popu-
						lation:		
						Crude		15.78
						Adjust	ed	12.3
						(The figure	for Er	igland and
						Wales was		11.3
Total number of dea					lic Instit	utions	•••	203
(Percentage								
Deaths from disease	s and acci	dents	of preg	nancy and	childbir	th :		
From Sepsi	is	•••	•••			•••		Nil
From other	r causes					•••		Nil
Death rate from Ma	ternal cau	ses pe	r 1,000	live and st	till births	• • • •		-
Number of deaths o								3
Death rate of Infant					live birt	hs		10.3
Deaths from Cancer			•••					45
Deaths from Measle			•••					Nil
Deaths from Whoop								2.711
	ing Cough	ı (all a	ages)					Nil
Deaths from Diarrh				•••	•••	•••	•••	Nil Nil

0	All ages	Rate	13	13.47	12.02	13.20	13.49	10.50	11.8	11.08	12.02	9.83	14.31	15.78
elonging t	AII	Num- ber	12	213	161	223	231	188	212	202	229	187	276	300
Net Deaths belonging to the District	Under 1 year of age	Rate per 1,000 net Births	II	99'99	22.05	29.03	32.15	9.12	23.26	17.06	16.33	19.01	14.76	10.3
	Under 1	Num- ber	IO	61	9	6	OI	60	7	2	4	2	4	8
rable ths	Of Residents not Regd.	District	6	12	15	15	25	IO	12	. 15	2.1	1.5	15	18
Transferable Deaths	Of Non- Residents	District	8	719	985	728	672	999	573	009	009	550	406	469
Deaths	strict ected	Rate	7	57.93	73.06	55.15	51.28	41.56	43.02	43.17	42.10	38.01	34.59	39.50
Total Deaths	the District	Num- ber	9	920	1,161	926	878	744	773	787	808	722	299	751
	et .	Rate	5	17.95	17.11	18.46	18.16	18.38	16.75	16.07	12.86	13.83	14.05	15.3
Births	Net	Num- ber	4	285	272	310	311	329	301	293	245	263	271	162
	Uncor- rected		3	252	277	327	347	307	302	279	248	282	296	314
	Population		7	15,880	15,890	16,790	17,120	006,71	18,020	18,230	19,050	19,020	19,280	010,61
	Vear		I	1944	1945	. 9461	1947	1948	1949	0561	1951	1952	1953	1954

TATALON TO THE CONTRACT OF THE PROPERTY AND VALUE OF THE PROPERTY OF THE PROPE

Note. This table has been prepared to compare the number of births and deaths registered in the City with the number of births and deaths actually attributable to the City (i.e. residents) with the corresponding rates. "Uncorrected" figures are compiled locally and are the births and deaths which actually occur in the City, including institutions "Net" figures are supplied by the Registrar General and relate to 'residents' only. "Rate" unless otherwise stated means the rate per thousand of the population.

13

BIRTHS

As in the previous year, births of City residents during 1954 again showed an increase, the total registered being 291—twenty more than the figure for 1953. The respective *crude* birth rates per thousand of the population (after deducting births of non-City residents registered in Chichester, and adding births of City residents occurring in other areas), being 15.30 for 1954, as compared with 14.05 for 1953.

For the purpose of *more accurate comparison* with statistics for other areas, having regard to the differing age and sex distribution of the population over the country as a whole, these *crude* rates are adjusted (using the "Area Comparability Factor" for births supplied by the Registrar-General, namely 1.02). These *adjusted* rates, together with similar figures for England and Wales, for the two years in question, are set out below:—

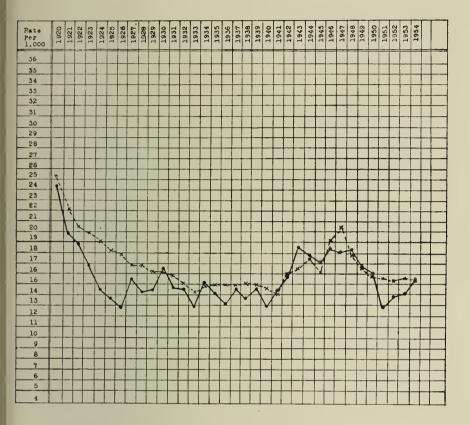
Year.	Chichester.	England and Wales.
1953	15.73	15.5
1954	15.60	15.2

It will be seen that the City birth rate is again slightly above the national figure (for 1954).

The following table shows births, male and female, and the birth-rates in the City for each year since 1920. These figures are also illustrated visually in graph form overleaf.

Year	Total Births	Males	Females	Crude Birth Rate	No. of males born per 100 females
1920	289	150	139	24.3	107.9
1921	244	120	124	19.70	96.7
1922	235	119	116	18.71	102.5
1923	213	110	103	16.79	106.7
1924	188	109	79	14.45	137.9
1925	186	92	94	13.87	97.8
1926	181	71	110	12.84	64.5
1927	223	124	99	15.59	125.2
1928	198	IOI	97	14.29	104.1
1929	199	102	97	14.46	105.1
1930	229	127	102	16.64	124.5
1931	205	95	110	14.72	86.3
1932	206	109	97	14.52	112.3
1933	198	105	93	12.99	112.9
1934	236	115	121	15.13	95.0
1935	223	122	101	14.14	120.7
1936	209	108	101	13.10	106.9
1937	239	120	119 '	14.59	100.8
1938	227	131	96	13.79	136.4
1939	245	128	117	14.62	109.4
1940	24I	129	112	12.99	115.9
1941	263	146	117	14.39	124.8
1942	275	136	139	15.78	97.8
1943	308	159	149	18.67	106.6
1944	285	154	131	17.95	117.5
1945	272	122	150	17.11	81.3
1946	310	161	149	18.46	108.0
1947	311	155	156	18.16	99.3
1948	329	172	157	18.38	109.6
1949	301	144	157	16.75	91.7
1950	293	149	144	16.07	103.5
1951	245	128	117	12.86	109.4
1952	263	135	128	13.83	105.5
1953	271	151	120	14.05	125.8
1954	291	158	133	15.30	118.8

CHART SHOWING THE BIRTH RATES OF CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales.

DEATHS

Deaths of City residents registered during 1954 (300) showed an increase of 24 over the corresponding figure for 1953 (276).

This is principally accounted for by the deaths of 152 persons of 75 and upwards in 1954, compared with 126 in 1953.

The *crude* death-rate per thousand of the population is 15.78, as compared with 14.31 for the previous year.

For comparison with the death-rate for other areas, or for England and Wales as a whole, the Registrar-General has supplied, as with births, an Area Comparability Factor—to be used to adjust the *crude* rates (compiled from the net figures of births and deaths of City residents) to compensate the low crude birth-rate and high crude death-rate which are normal in residential areas favoured by invalids and retired elderly people, Chichester coming within this category.

In such areas, the population tends to have a disproportionately high percentage of people in the older age-groups, so that, in consequence, births are fewer and deaths higher than would be the case in areas where the population,

by age-groups, is more evenly distributed.

It will be noted, from Table IV overleaf, that 75% of the deaths of City residents in 1954, were persons aged 65 and over, whilst 51% were aged 75 and over. There were 13 deaths aged 90 and over, the oldest being 99.

The adjusted death-rate for the City is 12.30, compared with 12.31 in 1953, and a figure of 11.3 for England and Wales for 1954.

The following table shows comparative rates for the past 3 years, whilst rates for a longer period are illustrated visually in graph form on a succeeding page.

Year	City Dea	th Rates	Death Rate for
Y ear	Crude Rate	Adjusted Rate	England and Wales
IOEI	12,02	0.3	12.5
1951		9.3	-
1952	9.83	8.45	11.3
1953	14.31	12.31	11.4
1954	15.78	12.30	11.3

TABLE IV

Deaths of "Residents" during the year 1954, classified by age and cause.

		То	Total									
	Causes of Death	Under I year	1—4—1	5—14	15—24	25—44	45—64	65—74	75 and upwards	Males	Females	GRAND TOTAL All Ages
	Coluum 1	2	3	4	5	6	7	8	9	10	11	12
2. 3. 4. 5.	Syphilitic disease Diphtheria Whooping Cough									I 		2 2 —
7· 8.	Meningoccocal infections Acute poliomyelitis Measles Other infective and parasitic		=		=		=	=		=		
	diseases Malignant neoplasm, stomach Malignant neoplasm, lung,	_	_	_	=	I	I	3	2	I	6	7
13.	Malignant neoplasm, breast Malignant neoplasm, uterus Other malignant and lym-		=	=	_	_	3 2 2	3	_ 	<u>-</u>	3 5 2	5 5 2
15. 16.	pliatic neoplasms Leukaemia, Aleukaemia Diabetes		=	<u> </u>	_	<u>3</u> _	4 	6	1 I —	15 1	I	25 I I
18.	Vascular lesions of nervous system Coronary disease—angina Hypertension with heart		=	_	_	I	8 9	5 14	21 12	14 21	21 15	35 36
20. 21.	disease Other heart disease Other circulatory disease						7 3	2 19 3	4 50 8	4 30 10	2 46 5	6 76 15
23. 24.	Influenza Pueumonia Brouchitis Other diseases of respiratory		=		=	_	2 4	5 3	19 6	13 6	- 13 7	26 13
26	system Ulcer of stomach and duo- denum	-		_				I 2	I 2	3	I 2	2 5
	Gastritis, enteritis and diarrhoea Nephritis and nephrosis	-	_		_	-	I			<u></u>	I 2	1 3
29.	Hyperplasia of prostate Preguancy, childbirth, abortion	_	_	_			_	ī	ī	2	_	2
	Congenital malformations Other defined and ill-defined diseases	I 2	I						6	- Г 6	1	2
34 35			=			3 — —	3 2 1		I 2 I	3 2	9 1 3 1	15 1 6 3
3	war		-	_	—	-	-	-	-	-	-	-
	TOTAL	3	I	4	-	II	56	73	152	139	161	300

WARD DISTRIBUTION OF DEATHS

			Estimated	Dea	aths			
	Ward		Population	Males	Females	Total		
East West South			7,3 ⁰ 4 6,341 5,3 ⁶ 5	60 34 45	. 75 37 49	135 71 94		
TOTAL	•••	•••	19,010	139	161	300		

The East Ward includes Graylingwell Hospital inmates, deaths of whom during 1954 numbered 88—see below.

The principal causes of death from 1944 to 1954 inclusive are shown in the following table:—

Cause of Death	1944	1945	1946	1947	1948	1949	1950	1951	1952	1953	1954
Tuberculosis, respiratory	6	7	4	9	7	2	5	3	3		2
Tuberculosis, other forms	2	í	2	_	Í	2	_	I	I	2	2
Pneumonia	6	3	9	12	10	18	7	15	17	29	26
Bronchitis and other diseases of		-									
the respiratory system	13	10	13	ΙI	7	7	ΙI	II	7	5	15
Disease of heart and blood vessels	70	74	80	81	62	79	99	92	69	114	133
Vascular lesions of the nervous											
system	22	2 I	26	24	32	22	24	20	28	31	35
Cancer (malignant and lymphatic											
neoplasms)	34	35	38	28	33	37	26	38	40	49	45

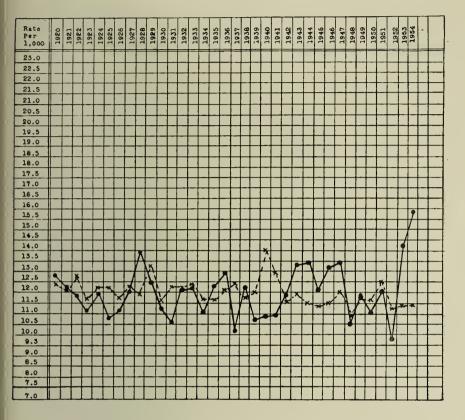
DEATHS IN HOSPITALS AND PUBLIC INSTITUTIONS

During the year, 203 deaths of Chichester residents occurred in hospitals and public institutions.

The figures given below refer to deaths of persons normally residing in Chichester. They do not represent the total number of persons who have died in those hospitals and institutions which are situated in the City area.

Hospital or Institution	No	of Deaths	Percentage of Total Deaths
Graylingwell Hospital		88	29.34
Royal West Sussex Hospital	. 1	34	11.34
St. Richard's Hospital	.	56	18.67
Cawley Nursing Home	. (12	4.00
Hawthorne House, Hampstead	. 1	2	.67
Haymeads, Bishop's Stortford	.	I	•34
London Hospital, Stepney	.	I	•34
Lord Mayor Treloar Orthopaedic			
Hospital, Alton	. \	I	-34
National Hospital, Holborn		I	-34
Queen Alexandra's Military Hospital,			
Westminster		I	-34
Rooksdown House, Sherborne St. John		I	•34
St. Mary's Hospital, Portsmouth		I	-34
Southlands Hospital, Shoreham		I	-34
Summersdale Hospital	.	I	•34
The Gables, Bognor Regis		I	-34
Zachary Merton Maternity Home,			
Rustington	.	I	·34
TOTALS		203	67.76

CHART SHOWING THE DEATH RATES OF CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales

INFANT MORTALITY

Deaths of infants under one year of age numbered 3 during 1954, a reduction of 1 from the previous year. The Infant Mortality Rate (the death rate of infants under 1 year per thousand live births) for 1954 was 10.3, compared with a rate of 14.76 for 1953. (The infant mortality rate for England and Wales for 1954 was 25.5—this being the lowest ever recorded).

As mentioned in the introduction to this Report, when considering statistics for a relatively small population such as Chichester, it must be borne in mind that a slight variation in the number of deaths, etc., is reflected disproportionately in the rates per thousand of the population. This is particularly true in connection with Infant Mortality and the Registrar-General has asked that attention should be drawn to this fact.

It is suggested that a more accurate comparison with previous years can be made by comparing the actual *numbers*, as distinct from *rates per thousand live births*.

For example, the infant mortality rate for the City for 1954 shows a reduction of nearly 4.5 from 1953, although only I fewer infantile death was recorded, whilst no true comparison can be made between the City infant mortality rate and the figure for England and Wales for 1954, as the former relates to a very small number of infant deaths.

The table below sets out details of the 3 infant deaths, by age and cause, which occurred in the City during 1954. Statistics for previous years are given on succeeding pages.

TABLE V
Infant Mortality, 1954

Cause of Death		Actual Age		То	Grand	
Cause of Death	Hours	5 Days	I Month	Male	Total	
Atelectasis	I	I		<u> </u>	2	2
Hydrocephalus	_	_	1	1	_	ı
TOTALS	I	I	I	I	2	3

Net City births, 291 (Legitimate, 280; illegitimate, 11) Net City deaths under one year of age, 3 (legitimate, 3; illegitimate o).

NEO-NATAL MORTALITY

Two deaths (both female) of infants during the first 4 weeks of life occurred during 1954, two less than in 1953. In both cases, death was due to natural causes.

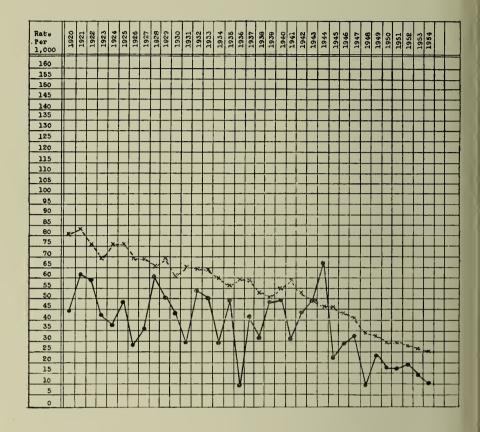
The neo-natal mortality rate per 1,000 total live births was 6.87 (compared with 14.76 in 1953). For England and Wales for 1954, the rate was 17.7 (the total of such deaths being 11,944).

INFANT MORTALITY

The total number of deaths under one year was 3, or 10.30 per 1,000 live births.

Year	No. of Infant deaths	Rate per 1,000 births	Percentage of total deaths at all ages	Infant Mortality rate in England and Wales
1920	9	44.9	6.0	80
1921	15	61.47	9.8	83
1922	14	59.57	9.4	77 .
1923	9	42.25	6.3	69
1924	7	37.23	4.5	75
1925	9	48.38	6.3	75
1926	5	27.62	3.2	70
1927	5 8	35.87	4.7	69
1928	12	60,60	6.3	65
1929	10	50.25	5.9	70
1930	10	43.66	6.5	60
1931	6	29.26	4.I	66
1932	11	53.39	6.4	65
1933	10	50.50	5.4	64
1934	7	29.66	4.0	59
1935	I I	49.32	5.7	57
1936	2	9.56	0.9	59
1937	10	41.84	5.9	58
1938	7	30.83	3.4	53
1939	I 2	48.58	6.4	50
1940	12	49.79	5.9	55
1941	8	30.41	4.0	59
1942	I 2	43.6	5.8	49
1943	15	48.7	6.8	49
1944	19	66,66	8.9	46
1945	6	22.05	3.1	46
1946	9	29.03	4.0	43
1947	10	32.15	4.3	4 I
1948	3	9.12	1.6	34
1949	7	23.26	3.3	32
1950	5	17.06	2.5	29.8
1951	4	16.33	1.7	29.6
1952	5	19.01	2.7	27.6
1953	4 3	14.76	1.4	26.8
1954	3	10.30	1.0	25.5

CHART SHOWING INFANT MORTALITY PER 1,000 BIRTHS IN CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales.

MATERNAL MORTALITY

There were no deaths from maternal causes recorded in the City during 1954. (One such death was registered in 1953, the first since 1949).

There were 478 maternal deaths in England and Wales in 1954, giving a maternal mortality rate per 1,000 total (live and still-births) of 0.69.

CANCER

Under this classification are grouped all deaths registered as being due to cancer, malignant and lymphatic neoplasms, epithelioma, sarcoma, etc.

The total number of deaths in the City during 1954 from all forms of

cancer was 45, 4 less than in 1953.

The death rate from this cause per thousand of the population was 2.36 (2.54 in 1953), which compares with a rate (provisional) of 2.03 for England and Wales for 1954.

Sixty-four per cent of the deaths due to cancer were persons aged 60 years

nd over.

The mortality from cancer for the years 1944/1954 inclusive is set out below:—

Year	Dea	aths	Total	Death rate per
i cai	Males	Females	Total	1,000 population
1944	13	21	34	2.I
1945	13	22		2.2
1946	19	19	35 38 28	2.2
1947	15	13	28	1.6
1948	19	14	33	1.8
1949	17	20	37	2.1
1950	12	14	26	1.4
1951	18	20	38	2.0
1952	23	17	40	2.1
1953	25	24	49	2.5
1954	19	26	45	2.3

When comparing the total number of deaths from cancer with the figures for previous years, any increase or decrease in the total population of the City must be taken into account.

In the following table, the sites of fatal cancer for both sexes are shown

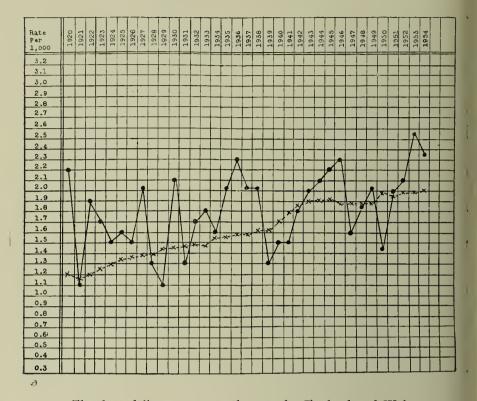
for the year 1954:-

101	inc y ca.	957													
В	Buccal (2)			(3)	(-	4)	(!	5)	(6	o)	(7	7)	(8)	
Phar	vity & ynx (lip gue, etc.)	, Bron	ng, chus		nach, iver	Intes rect perito		Uterus		Breast		Other Sites		To	tal
M.	F.	M.	F.	М.	F.	М.	F.	М.	F.	М.	F.	М.	F.	M.	F.
I	-	2	3	I	6	7	2	_	2	-	5	8	8	19	26

Deaths from Cancer for the year 1954, showing the actual ages, divided into male and female, were as follows:—

	Age at Death in Years																												
	5	39	40	44	46	47	52	53	54	55	58	63	64	69	70	72	74	75	77	80	81	82	83	84	85	87	88	94	Total
Males	I	2				I			2			2		1	1		2	2		I	I			I	I		1		19
Females			I	I	I		1	1	1	1	3		1	3		2	1	1	I		I	I	3			I		I	26
TOTAL	I	2	1	I	I	I	I	I	3	I	3	2	I	4	I	2	3	3	I	I	2	I	3	1	I	I	I	I	45

CHART SHOWING DEATH RATES FROM CANCER IN CHICHESTER SINCE 1920



The dotted line represents the rate for England and Wales

SECTION II.

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES.

Notifiable Infectious Diseases.

The following infectious diseases are, by law, notifiable to the Medical Officer of Health:—

Cholera
Diphtheria (including Membranous
Croup)

Dysentery
Encephalitis (Acute) (Infective
and Post-Infectious)

Enteric (Typhoid and Paratyphoid)
Fever

Erysipelas
*Food Poisoning or Suspected Food
Poisoning

Malaria Measles Meningococcal Infection Ophthalmia Neonatorum Plague
Acute Primary Pneumonia
Acute Influenzal Pneumonia
Poliomyelitis (Acute) (Paralytic and
Non-Paralytic, including also
Acute Polio-Encephalitis)
Puerperal Pyrexia
Relapsing Fever
Scarlatina or Scarlet Fever
Smallpox
Tuberculosis (Respiratory, Meninges
and C.N.S., and other forms)
Typhus Fever
Whooping Cough

Leprosy also became a notifiable infectious disease in 1951 but in this instance notifications have to be sent direct by the Medical Practitioner to the Chief Medical Officer at the Ministry of Health; information would be available locally whenever necessary.

*Details of notifications of **food poisoning** for the year under review may be found in Section V of this report under "Inspection and Supervision of Food."

Infectious diseases which are not notifiable are German Measles, Mumps, Chicken-pox and Influenza. The notifications received from head teachers when children are absent, suffering from or believed to be suffering from, these illnesses (and the notifiable infectious diseases) are of considerable assistance in gaining information as to the incidence of such diseases amongst the school population of the City.

Routine enquiries to trace the source of infection, etc., are made by the Public Health Department officials immediately on receipt of a notification of infectious disease. Advice is given to parents as to home nursing, exclusion from schools, etc., (both of patients and contacts for the prescribed periods), disinfection (carried out, where required, by the Department's disinfector either terminally or on removal of the patient to hospital) and general measures to prevent the spread of infection.

Copies of notifications of infectious disease are, under the National Health Service Acts, 1946-1948, forwarded to the County Medical Officer within 48 hours of their receipt. In addition, weekly returns are made to the County Medical Officer and the Registrar-General.

TABLE VI

NOTIFIABLE INFECTIOUS DISEASES

The following table gives details of cases (other than Tuberculosis) notified during 1954, showing in the age analysis columns, the final figures after any necessary re-diagnosis:—

Diseases	Originally	AGE ANALYSIS (after any necessary correction of diagnosis)									
Diseases	Notified	Under 1	to 2	3 to 4	5 to 9	to to	15 to 24	25 to 44	45 to 65	65 plus	Total
Diphtheria Measles Pneumonia (Acute pri-	1 4	=					=		=	_	1 4
mary and influenzal) Puerperal Pyrexia Scarlet Fever	5 1 41	=	_ 	7	27	<u> </u>		_	3		5 1 40
Whooping Cough	30	2	6	11	11						30
TOTALS	82	2	9	20	39	4	3	I	3		81

TABLE VII

WARD DISTRIBUTION OF

NOTIFIABLE INFECTIOUS DISEASES

(excluding Tuberculosis)

		Wards						
Diseases	Eas (Estima populat 7,3°4	ted (Estimated population:	SOUTH (Estimated population: 5,365)	TOTAL				
Diphtheria		- I		I				
Measles		- 3	I	4				
Pneumonia (Acute Primary and								
Influenzal)	. 1	4		5				
Puerperal Pyrexia		_	_	I				
Scarlet Fever*	18	15	7	40				
Whooping Cough	1	8	21	30				
TOTALS	21	31	29	81				

^{*}The majority of the cases of Scarlet Fever occurred in the months of March and April and were children under 10 living in either East or West Wards and attending a school in the Ward.

The table below gives details of City residents suffering from an infectious disease who were admitted to the Infectious Disease Hospital during the year 1954.

The majority were admitted either after diagnosis had been made at the out-patient departments of the local general hospitals, or because unsatisfactory home conditions prevented their being isolated satisfactorily.

Disease	No. of cases admitted to Hospital	Remarks
Acute Tonsillitis	4	
Acute Tonsillitis (?Bilat. Quinsy)	I	
Chickenpox	2	
Diarrhoea and Vomiting	I	
Diphtheria	I	
?Dysentery and Chickenpox	I	Diagnosed as Gastro-Enteritis.
Impetigo	I	
Mumps	5	
Mumps and Orchitis	I	
Pemphigus Neonatorum	I	
Pyrexia of Unknown Origin	I	
Rash (?Measles)	I	
Ringworm	I	
Scabies and Urticaria	I	
Scarlet Fever	13	
Scarlet Fever, Impetigo and Discharging Ear	I	
?Whooping Cough	ı	Diagnosed as Tracheal Bronchitis.
Total,	37	

POLIOMYELITIS

No cases of poliomyelitis were notified during 1954. One death, however, occurred during the year from this disease, the patient having had prolonged hospital treatment subsequent to original diagnosis and notification in 1953.

Routine investigations are made immediately a case is notified and a full report is sent to the County Medical Officer. In addition, to assist in research on the disease, details of each case are forwarded to the Medical Research Council.

DIPHTHERIA

For the first time in 7 years, a case of Diphtheria was notified during 1954. The patient (male aged 40) had not been immunised and was admitted to the City Isolation Hospital on 25.9.54 as a suspected case. The initial bacteriological investigations isolated a non-virulent organism resembling C. diphtheriae. The patient was discharged on 16.10.54, after final diagnosis as tonsillitis but was later re-admitted to hospital with partial paralysis of the soft palate. The case was a very obscure type, but he eventually recovered.

Further bacteriological investigations having in the meantime been carried out, the organism was eventually identified as a toxigenic mitis strain of C. diphtheriae.

Extensive enquiries failed to trace the source of the disease, whilst throat swabs of the contacts were found to be negative.

Isolated cases from time to time crop up throughout the country and serve as a reminder that the disease has not yet been eliminated, despite the remarkable success of the diphtheria immunisation campaign, comment upon which has been made elsewhere in this Report.

The following table admirably illustrates this point and gives details of the number of cases, deaths and fatality rate since 1917. I have commented elsewhere in this Report on the success of the diphtheria immunisation campaign (which is obvious from the undermentioned figures) and the danger of complacency as a result of the present freedom from this disease.

Year	Population	Cases	Deaths	Fatality per cent
1917	9,843	21	2	9.5
1918	11,851	61	3	4.9
1919	12,031	19	3	15.8
1920	12,200	38	I	2.6
1921	12,413	30	I	3.3
1922	12,560	10	_	
1923	12,680	8	I	12.5
1924	13,010	1	_	
1925	13,410	4	_	T -
1926	14,090	20	0 -	_
1927	14,300	29	I	3.4
1928	13,850	25	I	4.0
1929	13,760	10	I	10.0
1930	13,760	8	_	_
1931	13,920	5	-	_
1932	14,180	5 8	_	_
1933	15,240	5	_	
1934	15,590	19	I	5-3
1935	15,770	89	6	I,I
1936	15,950	29	I	3.4
1937	16,370	26	I	3.8
1938	16,460	7	_	
1939	17,530	15	2	13.3
1940	18,540	4	_	_
1941	18,270	7		
1942	17,420	7 3	_	
1943	16,490	9	_	_
1944	15,880	2	_	_
1945	15,890	2 8	<u> </u>	
1946	16,790		<u> </u>	_
1947	17,120	I	_	_
1948	17,900	0	-	_
1949	18,020	0	_	
1950	18,230	0	_	_
1951	19,050	0	_	
1952	19,020	0		
1953	19,280	0	_	
1954	19,010	I		

SCARLET FEVER

41 notifications of cases of Scarlet Fever were received during 1954 (as compared with 15 in the previous year); I case was subsequently diagnosed as intestinal obstruction and the notification withdrawn. The attack rate for this disease was 2.10 per 1,000 of the population (0.73 in 1953).

13 patients were admitted to the Chichester I.D. Hospital and I to Swandean Isolation Hospital; the remaining 26 were nursed at home.

There were 2 instances where 3 members of the same family contracted the disease, and 2 where 2 members of the same family were notified to be suffering from Scarlet Fever.

Although there was a sharp increase in 1954 in the number of cases notified, the disease was mild in type. There was, however, I death at the end of the year. The patient, a girl of 6, developed broncho-pneumonia soon after the onset of Scarlet Fever and died on 30.12.54. This was the first death assigned to Scarlet Fever by the Registrar-General since 1936.

The majority of cases occurred during March and April, 1954. The following table sets out statistics relating to Scarlet Fever since 1917.

	D 14	0	To (1)	73 4 114
Year	Population	Cases	Deaths	Fatality per cent
1917	9.843	20		_
1917	11,851	15		
1919	12,031	8	_	
1920	12,200	11	_	
1921	12,413	12	_	_
1922	12,560	17	_	_
1923	12,680	2	_	_
1924	13,010	3	_	_
1925	13,410	15	_	<u> </u>
1926	14,090	25		I _
1927	14,300	49	_	\
1928	13,850	39		_
1929	13,760	40	_	1
1930	13,760	37	I	2.7
1931	13,920	18	I	5.5
1932	14,180	14		<u> </u>
1933	15,240	88	_	_
1934	15,590	39	_	_
1935	15,770	49	_	_
1936	15,950	22	I	4.5
1937	16,370	14	_	
1938	16,460	6	_	_
1939	17,530	27	_	_
1940	18,540	33	_	-
1941	18,270	37	_	_
1942	17,420	55		_
1943	16,490	44	-	_
1944	15,880	78	—	_
1945	15,890	10	_	_
1946	16,790	12	_	_
1947	17,120	5	_	_
1948	17,900	6	_	_
1949	18,020	8	_	_
1950	18,230	25	_	_
1951	19,050	2	_	_
1952	19,020	6	_	
1953	19,280	14	_	-
1954	19,010	40	I	2.5

MEASLES

4 cases only were notified during 1954. Comparative figures since 1930 are set out below:—

Year	No. of Cases	Total Deaths	Death Rate
1930	Not Notifiable	2	0.14
1931	,,	_	<u> </u>
1932	,,	- 4	_
1933	,,		_
1934	,,	_ /	_
1935	,,		
1936	,,	2	0.12
1937	,,	_	_
1938	12	I	0.06
1939	,,		-
1940	380	_	_
1941	207		_
1942	220	- 1	—
1943	119	1 - 1	_
1944	10		_
1945	314	_	_
1946	121		_
1947	117		_
1948 .	107		_
1949	141	_	_
1950	2	_	-
1951	341		_
1952	3	_	_
1953	350	_	_
1954	4		—

WHOOPING COUGH

30 cases were notified during 1954 (a decrease of 25 over the preceeding year). Comparative figures since 1930 are as follows:—

Year	No. of Cases	Deaths	Death Rate
1930	Not Notifiable		_
1931	,,	I	0.07
1932	,,	I	0.07
1933	,,	· —	
1934	, ,,	_	_
1935	` ,,		_
1936	,,,	I - 0	—
1937	,,		M
1938	,,	· -	· —
1939	23	_	<u> </u>
1940	109	_	<u> </u>
1941	47	I	0.05
1942	31	_	
1943	16	_	_
1944	64	2	0.12
1945	11	_	
1946	31	_	_
1947	20	-	_
1948	87	-	_
1949	18		_
1950	15		_
1951	34	_	_
1952	2	_	_
1953	55	- I	_
1954	30	l - 1	

TUBERCULOSIS

16 cases were added to the register during the year 1954, as follows, compared with 22 in 1953:—

	Pulme	Pulmonary		Non- Pulmonary		Comparative figures for 1953	
	М.	F.	М.	F.	1954	101 1953	
New Cases—(i.e. notified for the first time)	5	2		I	8	17	
Cases transferred from other areas— (as the family moved into the City)	4	3	I	-	8	5	
TOTALS	9	5	I	I	16	22	

Of these, 2 females (I pulmonary and I non-pulmonary) were diagnosed only after post-mortem examination, the cases not having been notified prior to death. These 2 are therefore also included in the removals from the register set out below.

Cases removed from the Register during 1954 numbered 23, as follows:—

	Pulmonary		Non- Pulmonary		Total for	Comparative figures for 1953
	M.	F.	M.	F.	1954	101 1955
Deaths Recovered Transferred out of City Lost sight of (i.e. moving to another area without notifying the	1 2 4	1 1 7			3 5 - 12	4 4 6
Authority concerned)	_	2		I	3	
TOTALS	7	11	2	3	23	14

It will be noted from Table IV on page 17 that the total number of deaths from Tuberculosis during 1954 was 4 (2 pulmonary, 2 non-pulmonary), which is 1 more than the figure given in the table set out above. This additional death was an inward transfer, the cause of death being assigned by the Registrar-General to "Non-pulmonary Tuberculosis."

Cases of Tuberculosis on the Register at 31st December, 1954

П				Pulmonary			Non-	Pulmoi	Total (Pulmonary and non-	
			M.	F.	Total	M.	F.	Total	pulmonary)	
(a) (b)	Residents of J Ward Allocat residents:—			6	8	14	-	_	_	14
	East Ward	• • •	• • •	14	9	23	2	4	6	29
	West Ward	• • •		17	13	30	2	-	2	32
	South Ward	•••	•••	14	13	27	I	I	2	29
	TOTAL	•••	•••	51	43	94	5	5	10	104

In a circular issued in March, 1954, the Ministry of Health drew attention to the fact that although the death rate from tuberculosis in recent years has declined rapidly (as will be seen from the table overleaf), this has not been accompanied by a corresponding fall in notifications of new cases. It is, however, felt, in the view of the Ministry, that the number of notifications now bears a closer relationship to the incidence of the disease, mainly because cases are now brought to light which would not formerly have been detected and notified.

Whilst, in the City in 1954, new notifications showed a marked decrease over the preceding year (8, as compared with 17), in other areas control and preventive measures present a considerable problem and the demands made on mass X-ray units, particularly the mobile type, have meant that surveys cannot be undertaken as often as could be desired. In the post-war period, it has only been possible for one mass radiography survey to be carried out in the City (in March, 1951) but efforts are being made to secure a return visit by a mobile unit and it is hoped this will be arranged at a very early date. A negative report of an X-ray is as important and reassuring to members of the general public as the discovery of new cases.

Mass radiography has, moreover, meant early diagnosis of the latter, and, with new methods now available, has meant that treatment can be commenced with speedier and more satisfactory results than in the past. Home conditions, of course, play an important part in the treatment and rehabilitation of patients

suffering from tuberculosis.

The housing situation of the 104 cases remaining on the Tuberculosis Register in the City at the end of 1954, was as follows:—

gister in the City at the end of 1954, was as follows:—	
Patients actually living in Council Houses	46
Residents of Institutions within the City	14
Patients living in privately owned property and who have not	
applied for rehousing in Council Houses	42
Patients who require alternative accommodation and who have	
applied for a Council House	2
	104

Good progress has been made in the past few years in re-housing persons suffering from tuberculosis and particularly during 1954 when 8 were rehoused. I am deeply indebted to the City Council for their most willing assistance in this matter.

The number of patients from the City treated at Sanatoria during the year under review, is given below:—

Admitted to	Male	Female	Total
Aldingbourne House	13	IO	23
Bognor Regis Annexe	4	I	5
Totals	17		28

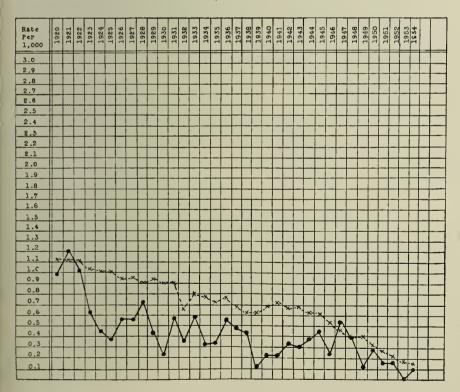
The ages of the new, and fatal cases in 1954 are shown below:—

			Ne	w Cases		Deaths				
Age Periods		Pulmonary		Non-Pulmonary		Pulm onary		Non-Pulmonary		
		М.	F.	M.	F.	M.	F.	М.	F.	
Under 1 year				_		_	_	_		
1-5 years					l I	_	1		-	
5-15 years		II — I	/	I	_	_	-		_	
15-25 years			2		_ i	—	1	- 1	U	
25-35 years		3	I	-	_		1		-	
35-45 years		2	I			-				
45-55 years		2		_	- 1	- 1	- 1			
55-65 years		2	_	<u> </u>	_	I	-			
55 years and up	pwards	-	1	-	I		I	I	I	
TOTAL		9	5	I	ı	I	I	ı	I	

Statement showing mortality from Tuberculosis (Pulmonary and Non-Pulmonary) in Chichester and in England and Wales, since 1937. (Figures as supplied by the Registrar General).

Year	Year	Deaths un Years		Total 1	Deatlis	Tuberculosis (all forms) Death Rate per 1,000 of population		
		Pulmonary	Non- Pulmonary	Pulmonary	Non- Pulmonary	Chichester	England and Wales	
	1937		_	8	2 -	0.61	0.69	
	1938		_	7	_	0.42	0.63	
	1939	_	- 1	2	3	0.28	0.63	
	1940	_		4	I	0.27	0.69	
	1941		I	4	5	0.49	0.72	
	1942	I	I	6	2	0.45	0.65	
	1943	N - 2		5	2	0.42	0.66	
	1944	_		6	2	0.50	0.62	
	1945	-	— —	7	I	0.50	0.61	
	1946	_	_	4	2	0.35	0.54	
	1947	_		9		0.52	0.54	
	1948		- 1	6	I	0.39	0.51	
	1949	l —	I	2	2	0.22	0.45	
	1950		- 1	5	_	0.27	o. 3 6	
	1951		—	3	I	0.21	0.32	
	1952	_		3	I	0.21	0.24	
	1953	- 1	-		2	0.10	0.20	
	1954		· - ·	2	2	0.21	0.18	

CHART SHOWING DEATH RATES FROM PULMONARY TUBER-CULOSIS, SINCE 1920



The dotted line represents the rate for England and Wales.

SECTION III.

GENERAL PROVISION OF HEALTH SERVICES IN THE CITY

1. NATIONAL ASSISTANCE ACTS, 1948 and 1951.

The Ministry of Health has requested details of any action taken during the year 1954 under Sections 47 and 50 of the principal Act. Details are as follows:

(a) Section 47 (as amended by Section 1 of the National Assistance (Amendment) Act, 1951)

This section empowers the City Council to apply to a Court of Summary Jurisdiction for an Order authorising the removal to suitable premises of persons who are in need of care and attention.

No action was necessary under this section during 1954.

(b) Section 50

A duty is placed upon the City Council to arrange for the burial of persons dying within the City (except in Hospitals) where it appears that no suitable arrangements are being made.

No action was necessary under this section during 1954.

2. SERVICES PROVIDED BY THE WEST SUSSEX COUNTY COUNCIL.

(a) Ambulance Service and Hospital Car Service.

Acting as agents for the County Council, the St. John Ambulance Brigade operates the ambulance and hospital car service.

The Hospital Car Service is primarily intended for persons who have an appointment at a hospital, clinic, etc., and who are not fit to travel by public transport, or public transport is not available.

(b) Maternity and Child Welfare.

(i) Expectant and Nursing Mothers.

Ante- and Post-natal Clinics are held at the Health Centre, Chapel Street, Chichester, under the control of the West Sussex County Council. Clinics are held on Thursdays (all day) and expectant mothers receive advice from doctors or the nurses in attendance on all matters concerned with their pregnancy, or on any ensuing complications which may arise.

Relaxation classes for expectant mothers (first established in the City in March, 1948) are proving popular. Sessions are held weekly at the Health

Centre.

Maternity outfits are available free of cost at the Health Centre.

The West Sussex County Council employs a staff of qualified midwives

and operates an efficient domiciliary midwifery service.

In cases where General Practitioners consider hospital treatment advisable they make arrangements direct with the Hospital Management Committee for their patients' admission.

Arrangements for the admission to hospital in other cases, e.g. on the grounds of unsatisfactory home conditions are referred to the West Sussex

County Council for investigation.

The County Council have made arrangements with the Chichester Diocesan Moral Welfare Association to care for unmarried mothers and their children.

(ii) Young Children.

Child Welfare Clinics are held at the Chichester Health Centre, Chapel Street, Chichester, twice weekly on Tuesdays and Fridays. Advice is given by the doctors or nurses in attendance on matters of health, infant feeding and the management of babies.

Arrangements have been made for the provision of National Dried Milk, Vitamins, etc. A number of proprietary baby foods at cost, or reduced price are available on medical advice.

(iii) Statistics.

The following statistics show the *total attendances*, etc., at the ante- and post-natal clinics and at the child welfare clinic during 1954. These statistics include the attendances made by persons from the urbanised area around the City.

(a)	Ante-natal Clinic				
	Number of expectant mothers who atten	ded cl	inics		539
	Number of attendances made	•••		•••	2,140
(b)	Post-natal Clinic				
` '	Number of mothers who attended clinics				193
	Number of attendances made	•••		•••	293
(c)	Child Welfare Clinic.				
(-/	Number of children under 5 years of age	who at	ttended		539
	Number of attendances made	•••	•••	•••	3,205
(d)	Relaxation Classes				
()	Number of attendances made		•••	•••	495

(c) School Clinics.

A Minor Ailments Clinic is held weekly in the Chichester Health Centre

Chapel Street, a Medical Officer attending fortnightly sessions.

During the year, 227 children attended the clinic, making 813 attendances. Appointments are made with an Ophthalmic Surgeon for children suffering from defective vision, also with an orthoptist for squint, and arrangements are made where necessary with St. Richard's Hospital and the Royal West Sussex Hospital for the operative treatment of tonsils and adenoids.

Arrangements are also made for the treatment of children suffering from

crippling defects, ear defects and speech defects.

An Orthopaedic Clinic is held at Chichester Health Centre.

A Nutrition Clinic is held at the Chichester Health Centre fortnightly, where mothers are advised regarding the health of children suffering from malnutrition. Vitamin C and Adexolin Tablets are available for such children. During the year 101 children attended the clinic, making 190 attendances.

(d) Health Visiting.

Health visitors are available to give advice on the health and training

of young children and the care of persons suffering from illness.

They also give advice on the preservation of health, precautions to be taken against the spread of infection, and on other aspects of social welfare work.

(e) Home Nursing.

An efficient Domiciliary Nursing Service is operated by the West Sussex

County Council, who supply a staff of qualified nurses.

The services of a general nurse are provided on the recommendation of a doctor to any home requiring such service, on application to the general nurse concerned.

(f) Prevention of Illness, Care and After-care.

Tuberculosis—A domiciliary tuberculosis service is maintained by the West Sussex County Council (the responsibility for provision of a tuberculosis consultant service was transferred to the Regional Hospital Board as from 5th July, 1948). A Chest Clinic is held every Tuesday morning, with an additional clinic for contacts only on the afternoon of the first Friday in each month, at Aldingbourne House Sanatorium, near Chichester, where X-ray facilities exist. The Chest Physician at the Sanatorium, who is on the Regional Hospital Board's staff, acts as consultant to the County Council's tuberculosis service and is in attendance at these clinics. His services are placed at the disposal of local medical practitioners in any case where they desire a specialist's opinion.

The County Council have arranged for certain of their duties with regard to the care and after-care of tuberculosis patients to be carried out by the Sussex Rural Community Council, one of whose Committees was set up in Chichester. Cases referred to them by the Chest Physician are visited by their organisers or representatives, and they have given valuable help in the way of provision of beds, bedding, clothes, extra nourishment, domestic help in the

house, and the boarding-out of child contacts.

Patients discharged from Hospital.—Two Care Almoners, appointed in January, 1950, conduct a domiciliary welfare service in the County area, in the follow-up of patients discharged from hospital and in the carrying out of social welfare work amongst invalids generally, including tuberculosis patients.

(g) Home Help Service.

The Women's Voluntary Service has undertaken, on behalf of the County Council, the organisation of the Home Help Service. When the supply of Home Helps permits, assistance is given to households where there are, for instance, maternity cases, illness, young children (where the mother is away or ill), aged cr infirm persons etc. Applications for such domestic assistance should be accompanied by the recommendation of a doctor, nurse or midwife, and should be made to the Women's Voluntary Service Area Organiser, based in the City. A charge, according to the applicant's means, is made for the service, except where precluded by financial hardship.

(h) Immunisation against Diphtheria.

Sessional arrangements are made for this protective inoculation to be carried out at schools and at the Health Centre, where necessary. In addition, under an arrangement made with the County Council, immunisation can be carried out by general practitioners at their surgeries.

During 1954, 268 children were immunised against diphtheria, whilst, in addition, 302 children received reinforcing injections (usually just prior to, or just after, their commencing school attendance) to supplement the protection given by their initial immunisation at an earlier age. The table below gives details of the ages of children who received either primary or reinforcing injections during 1954.

	AGES: (i) at date of final injection (as regards(A)) (ii) at date of reinforcing injection (as regards (B))								
	Under	I	2	3	4	5-9	10-14	Total	
(A) Number of children who completed a full course of <i>primary</i> immunisation during 1954	20	116	71	14	9	37	I	268	
(B) Number of children who received a secondary (reinforcing) injection (subsequent to primary immunisation at an earlier age) during 1954					2	268	32	302	

National Statistics for Diphtheria since 1940 are given below. They reveal the success of the Diphtheria Prophylaxis Scheme. Both the number of deaths and the number of cases in 1954 are the lowest ever recorded.

During the ten-year period 1931-1940 the average number of original notifications was about 55,300 per annum throughout England and Wales.

Diptheria-National Statistics

Year	Deaths	Cases originally notified	Corrected Notifications
1941	2,641	50,797	_
1942	1,827	41,404	<u> </u>
1943	1,371	34,662	i —
1944	934	29,949	23,199
1945	722	25,246	18,596
1946	472	18,283	11,986
1947	244	10,465	5,609
1948	156 84	8,034	3,575
1949	84	4,971	1,890
1950	49	2,833	962
1951	33	1,983	664
1952	32	1,427	376
1953	23	1,034	266
1954 (provisional			1
figures)	9	791	182

(i) Vaccination against Smallpox.

Arrangements have been made for Vaccination against Smallpox to be carried out by the General Practitioners, at their surgeries, and, in addition, sessional arrangements can be made at the Health Centre should the need arise. Vaccination is on a voluntary basis, and the Ministry of Health have, in a recent circular, expressed concern at the low level of protection afforded at the present time, especially to children. In 1954, in the country as a whole, only 34.5% of babies under one year of age had been vaccinated. This figure is a very slight improvement on 1953 (34%) and 1952 (30.7%) but it is pointed out that the rapid means of travel now available, especially to and from countries where Smallpox is endemic, has increased the consequent risk of unforeseen infection and the Ministry stresses the need for active measures (including suitable publicity) to secure a much wider protection by vaccination.

3. MENTAL HEALTH.

Through the kind co-operation of the Medical Superintendent of Graylingwell Hospital, Dr. J. Carse, the following notes have been made available concerning the mental health services, in advance of the publication of his annual report covering 1954.

(a) Out-Patients.

A Psychiatric Out-Patient Clinic is held at the Royal West Sussex Hospital, Chichester, each Thursday afternoon beginning at 2.0 p.m. Appointments for new patients are made direct with the Hospital (Appointments Bureau or Almoner) usually through the patient's own doctor.

Out-patients are also seen at Graylingwell Hospital by special arrangement,

but no regular sessions are held.

(b) In-Patients.

In almost every case where in-patient treatment is needed, patients are admitted to Summersdale Hospital or Graylingwell Hospital, as advised by the Consultant at the out-patient interview. In a few instances use is still made of the facilities provided for in-patient treatment at the Royal West Sussex Hospital.

(c) Public Relations.

The importance of public relations work is again stressed in the report, the main object being to keep the public fully informed of the psychiatric services available and to encourage them to seek advice and treatment promptly. Many talks and lectures were given to a variety of groups of people and facilities were afforded for the hospital to be visited. As a result, Dr. Carse feels confident that Graylingwell and the aims and practice of psychiatry are no longer the terrifying mysteries they used to be, and that the majority of the public in the surrounding area have a good understanding of the true nature of mental illness and what is being done for it.

4 HOSPITAL FACILITIES.

The City of Chichester is situated in the area administered by the South West Metropolitan Regional Hospital Board, and the General Hospitals in the City and the Chichester Infectious Diseases Hospital form part of a group of eight hospitals managed by the Chichester Group Hospital Management Committee. Your Public Health Committee Chairman and Medical Officer of Health are members of this Committee.

Graylingwell Hospital has its own Hospital Management Committee.

Details of the Hospitals serving the City are as follows:—

(a) General Hospitals.

Royal West Sussex Hospital, Broyle Road. Accommodation 202 beds. St. Richard's Hospital, Spitalfield Lane. Accommodation 400 beds.

(b) Mental Hospitals.

Graylingwell Hospital, College Lane. Summersdale Hospital, College Lane

Accommodation 947 beds. Accommodation 84 beds.

(c) Infectious Disease Hospitals.

(i) General Cases.

Chichester Infectious Disease Hospital, Spitalfield Lane, Accommodation 44 beds and 4 cots. (16 actually available).

(ii) Smallpox Cases.

Joyce Green Hospital, Dartford, Kent. This Hospital will receive cases of smallpox from the City and arrangements for the admission of cases have to be made by the County Medical Officer of Health.

The Ministry of Health has formed a panel of consultants covering the various areas and their services can be obtained on application by the Medical Officer of Health. The County Medical Officer of Health is to be informed immediately, whenever this step has been taken.

(iii) Cases of Tuberculosis.

There is a Sanatorium for the treatment of cases at Aldingbourne, near Chichester, with accommodation for 70 patients and an annexe situated at Bognor Regis where there are 50 beds.

Cases of thoracoplasty are received at King Edward VII Sanatorium, Midhurst, and St. Richard's Hospital, Chichester.

(iv) Venereal Disease.

Residents in the County may attend the following clinics:—

Brighton

Royal Sussex County Men: Mondays, Thursdays and Satur-

Hospital, Eastern Rd., days, 1.30 p.m. to 4.30 p.m.

Kemp Town. Tuesdays, 1.30 p.m. to 4.30 p.m. Women: Thursdays and Saturdays, 10

a.m. to I-p.m.

Portsmouth.

St. Mary's Hospital Tuesdays and Thursdays, Men:

a.m. to 12 noon; 5 p.m. to 7 p.m. (Ward C 2).

Women Mondays, 5 p.m. to Wednesdays 2 p.m. to 4 p.m. and Fridays 10 a.m. to 12 noon.

Children:

Worthing

The Hospital, Men: Wednesdays, 4.30 p.m. to 5.30 p.m.

Lyndhurst Road.

Fridays, 5.30 p.m. to 6.30 p.m. Wednesdays, 2 p.m. to 4 p.m. Fridays, 3 p.m. to 5 p.m. Women:

Mr. D. G. Martin, F.R.C.S., the Surgeon Superintendent of St. Richard's Hospital, Chichester, has again furnished me with details of the work carried out during the year at the Treatment Centre opened at the Hospital in May,

In 1954, the Centre dealt with 39 new patients, including 14 who had commenced treatment elsewhere. Total attendance for the year were 328. During the year, 26 patients were discharged from further attendance, 4 transferred to other Centres for treatment on leaving the district and o ceased to attend.

The Centre continues to serve a fairly wide area of the County, as previous to its opening there had been no facilities for treatment available between Portsmouth and Worthing.

There is a weekly session on Wednesdays from 6 p.m. to 7 p.m.

SECTION IV.

HOUSING

Despite the restrictions placed on the building programme (the allocation of new houses for 1954 was only 80), continued excellent progress was made by the City Council during the year under review, by the provision of new accommodation to relieve the housing problem in the City. 100 new Council houses were completed in 1954, compared with 142 in the previous year. The total number of houses completed in the post-war period (since 1945) is, therefore 832, of which 782 were permanent houses and 50 prefabricated bungalows.

The number of applicants on the Council's housing list who were rehoused during 1954 was 132, as compared with 159 in the preceding year. to the new nouses completed during 1954, a further 32 houses became vacant and were re-let to housing applicants, making the total of 132 referred to above).

At the end of 1954, there were 52 houses under construction, and the placing of contracts was in hand in respect of the 80 houses allocated as the Council's building programme for 1955. Although this figure shows no change from the 1954 allocation, it should be pointed out that 65 of these houses have

been allocated by the Ministry for the rehousing of families displaced from clearance areas and individually unfit houses, this being the first instalment in the Council's programme of slum clearance, being carried out in accordance with policy outlined in the Government's White Paper on housing.

It will thus be seen that a balance of only 15 houses will be available in the 1955 allocation of new houses for the normal rehousing programme (of applicants on the Council's housing waiting list). Without a compensatory increase in the Council's allocation of new houses in future years a considerable slowing-down is inevitable in the rate at which this waiting list has, hitherto, been reduced, with a corresponding lengthening of the period for which applicants will have to wait to be rehoused.

However, it is understood that the Government feels that the excellent progress made in recent years in dealing with the housing problem by new construction now justifies the diverting of part of the effort towards the problem of older houses, with particular emphasis on the resumption of slum clearance under the Housing Acts, and, in addition, on the alteration and conversion of suitable houses, together with further concentration on the repairing of those others which can be rendered fit at reasonable expense.

As the result of a survey carried out in the City to determine the exte of the Council's task under the first of these categories, in order that thnt proposals for dealing with unfit houses required to be submitted to the Ministere of Housing and Local Government under section 1 of the Housing Repairs and Rents Act, 1954, could be formulated, it was estimated that approximately 420 houses were suitable only for demolition under Parts II and III of the Housing Act, 1936.

At the time of writing this Report a start has been made on this clearance and demolition programme by the declaration by the Council of the first 4 clearance areas, involving a total of 33 houses, whilst the balance of the first instalment referred to above will be dealt with by phasing with the new houses

under construction for rehousing purposes.

During 1954, 18 of a total of 24 bungalows were completed (the balance were let early in 1955), specifically for elderly people (applicants in the 'C' category on the housing waiting list). Construction is also well under way of 20 flats (2-bedroom) for further similar applicants and for people who, for medical reasons, require ground floor accommodation. It will be noted, however, from the details of applicants now on the waiting list (set out below) that, despite the provision of these bungalows and flats, the numbers of applicants in the 'C' category rose during 1954 from 58 to 64 and at the time of writing this Report it stands at 72.

Details of applicants for Council house accommodation

(A) Applicants living in Lodgings (i) Residing in the City		At 1st January, 1954	At 31st December, 1954
Bungalows 58 64	(i) Residing in the City (ii) Residing outside but working in the City (iii) Residing and working outside the City (B) Applications from Householders. (i) Residing in the City (ii) Residing outside but working in the City (iii) Residing and working outside the City	35 18 — 299 124 20 3	34 23 — 281 91 16 3
		58	455

One factor affecting rehousing to some degree (and which will be of considerable importance during the course of the slum clearance programme) is the comparatively higher rents which must be charged for new Council houses, due to increasing building costs. In some cases, these rents are beyond the means of applicants, now paying lower (controlled) rents for their existing accommodation, and they are having to wait until suitable cheaper-rented houses become available for re-letting. Every opportunity is taken, by means of transfers or exchanges, to meet the needs of such applicants and to secure the type of accommodation required with the minimum delay. The problem will increase as rehousing is carried out of families displaced from clearance areas, etc., for in ε number of cases it will be difficult to provide new houses at rents within the means of these tenants.

The following tables show the different types of Council houses erected, and under construction, at 31st December, 1954, according to roads and in order in which they were erected:—

Summary

(showing position at 31/12/54)

Pre-1940 Council Houses	 481
Post-1945 Council Houses	 832
Miscellaneous Flats and Houses	 68
Total Council properties	 1,381

(a) Erected Pre-1940

Situation	Year		Grand			
Orthon	Erected	Parlour	Non- Parlour	Semi- Bunga- low	Bunga- low	Total
Pound Farm Road	1920	22		_		22
Appledram Lane**	1923	12				12
Adelaide Road	1924	20	24	_		44
Albert Road**	1924			8	8	16
Lewis Road	1925	_	44			44
Kingsham Road	1925	16	52	_	-	68
Alexandra Road	1926	12	_			12
St. James's Road	1930		18		· —	18
St. James's Square	1930		54	_		54
Kent Road	1934	_	31	_		31
St. Pancras	1934	_	, 2	_		2
High Street	1934	_	2	_		2
Spitalfield Lane	1935	_	20	_	_	20
St. James's Square	1936/37	l —	4	_	_	4
Florence Road	1936/37	_	8		_	8
Gilmore Road	1936/37	<u> </u>	22		_	22
Oving Terrace	1936/37	<u> </u>	18		_	18
Albert Road	1937/38	i —	16	_	_	16
Clay Lane	1937/38	_	8	<u> </u>	_	8
Frederick Road	1937/38] —	10	_		10
High Street	1937/38	_	2	_		2
St. Paul's Road	1937/38	_	6	_	_	6
Bramber Road	1938/39	_	34	_	_	34
Cherry Orchard Road	1938/39	-	8	_	_	8
TOTAL	1	82	383	8	8	481

^{**}Transferred to City Council when boundary was extended in 1933.

(b) Erected during post-war period (1945-1954)

		Ere	cted	1945	/53	Ere		duri 54	ing			onstr 31/12		
Situation	Year erected	Parlour	Non-Parlour*	Bungalows and Flats	Total	Parlour	Non-Parlour*	Bungalows and Flats	Total	Parlour	Non-Parlour*	Bungalows and Flats	Total	Grand Total
Swanfield Drive Chart Bastland Road Mumford Place Cherry Orchard	1945/46 1946/47 1946/47		=	50 I 4	50 13 18		=	=		Ξ		=		50 13 18
Road Road Exton Road Hay Road Taverner Place Swanfield Drive Greenfield Road Blandford Road Bradshaw Road Castleman Road Chatfield Road Manning Road Story Road Dallaway Road Kingsham Ave. Hardham Road St. Wilfrid Road Neville Road	1947/49 1947/49 1947/49 1947/49 1947/49 1949/50 1950/51	12 70 48 14 26 24 10 12 28 24 20 10 8 6		2 4 4	4									12 72 52 18 26 24 10 12 28 24 20 10 8 49 41 12 26
Sherborne Road Langton Road Oliver Whitby	1950/55 1950/53	18	30 16		49 16	18		=	18		2	7 [†]	9	76 16
Road Sherlock Avenue Barton Road Hilary Road Hannah Square Tower Close John Arundel	1952/54 1952/53 1952/54 1952/53	26 9 — —	38 10 20 12 24	1 24 — — 16	65 43 20 12 24 16	4 = = = = = = = = = = = = = = = = = = =	4 11 7		8 11 - 7	4			4	77 43 31 12 31 16
Road Barlow Road Durnford Close Newlands Lane	1953/55 1953/55 1954/55 1954/55	=				18 20 —		<u>-</u> 18 <u>-</u>	18 20 18	6 4 3 20°			6 4 9 20	24 24 27 20
	TOTAL	400	185	147	732	60	22	18	100	37	2	13	52	884

Notes:

QPrefabricated Bungalows—

^{*}These non-parlour type houses have a Kitchen-Diningroom

[†]Shops with Flats over

[‡]Flats

[°] Includes 4 under construction for West Sussex County Council

HOUSING STATISTICS

The following shows the work carried out during the year by the Chief Sanitary Inspector, Mr. T. C. Ward, and his Assistant, Mr. K. T. Aston, in respect of privately-owned dwellinghouses:—

1.	Inspection of dwelling-houses during the year:—	
	(1) (a) Total number of dwelling-houses inspected for housing	
	defects (under Public Health or Housing Acts)	273
	(b) Number of inspections made for the purpose	560
	(2) (a) Number of dwelling-houses (included under sub-head (1)	
	above) which were inspected and recorded under the	7.0
	Housing Consolidated Regulations, 1925 and 1932 (b) Number of inspections made for the purpose	10 10
		10
	(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	10
	(4) Number of dwelling-houses (exclusive of those referred to	
	under the preceding sub-head) found not to be in all respects	
	reasonably fit for human habitation	82
2.	Remedy of defects without service of formal notices:—	
	Number of unfit or defective dwelling-houses rendered fit	
	during the year as a result of informal action by the local	
	authority under the Public Health or Housing Acts	76
3.	. Action under Statutory Powers:—	
	(i) Repairs.	
	(A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:— No action was taken during the year.	
	(B) Proceedings under Public Health Acts:—	
	(I) Number of dwelling-houses in respect of which statutory	
	notices were served requiring defects to be remedied	6
	(2) Number of dwelling-houses in which defects were remedied	
	after service of statutory notices :— (a) By owners	4
	(b) By local authority in default of owners	Nil
	(ii) Demolition and Closing Orders.	
	(A) Housing Act, 1936.	
	(1) Number of dwelling-houses in respect of which Demolition	
	Orders were made (under Section 11)	5
	(2) Number of dwelling-houses demolished as a result of	
	formal or informal procedure (under Section II)	10
	(3) Number of dwelling-houses where undertakings under Section 11 not to re-let for human habitation were given	
	by the owner	5
	(4) Number of dwelling-houses closed as a result of such	3
	undertakings	7
	(5) Parts of buildings closed (under Section 12)	Nil
	(B) Housing Act, 1949.	27'1
	(1) Closing Orders made (under Section 3 (1)) (2) Demolition Orders determined and Closing Orders sub-	Nil
	stituted (under Section 3 (2))	Nil
	(C) Local Government (Miscellaneous Provisions) Act, 1953.	_ ,,,,
	(I) Closing Orders made (under Section 10 (I))	Nil

4. Housing Act, 1936—Overcrowding.

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SECTION V.

INSPECTION AND SUPERVISION OF FOOD

Food Poisoning.

Although no cases of food poisoning or of suspected food poisoning were notified in the City during 1954, it should be remembered that, with the change in the eating habits of the public since 1939 and the marked trend towards communal feeding in school, factory and staff canteens, involving the greatly-increased use of processed, re-heated and made-up food dishes, the dangers from outbreaks of food poisoning throughout the country have increased to an alarming extent. Statistics given by the Registrar-General of the numbers of notifications of this illness which were received in recent years show clearly the serious nature of this increase, and it should be stressed that for every case notified, there may be several, either mild in type or not specifically diagnosed, which are not brought to light by notification.

In 1951, 5,797 cases of food poisoning were notified in England and Wales. In 1952, the figure was 5,885, but in 1953 and 1954, nearly twice as many notifications were received, the totals being 10,374 and 10,401 respectively.

In order that immediate steps can be taken to trace the cause of an outbreak and control its spread, it is of paramount importance that early notification of the occurrence or suspected occurrence of a case of food poisoning be made to the Medical Officer of Health, and efforts made for the retention of suspicious food and/or specimens (vomit, faeces, etc.) from patients, so that early laboratory investigations can be carried out to trace the source of the illness.

The Chichester Corporation Act, 1938, and the Food and Drugs Act, 1938, have made it a duty of medical practitioners to notify to the Medical Officer of Health all cases, or suspected cases, of food poisoning.

Milk.

On 1st April, 1954, the Milk (Special Designation) (Specified Areas) Order, 1954, came into force. This Order, made by the Minister of Food under section 23 of the Food and Drugs (Milk, Dairies and Artificial Cream) Act, 1950, requires All milk sold by retail in six more areas in England (including Chichester, Worthing and District) and the first two areas in Wales, to be "specially designated" milk, (that is, either pasteurised, sterilised or tuberculintested). This further step towards the Ministry's ultimate goal of "safe" milk for the whole of the country means that, with the large areas already specified, over 50% of the milk supplies in England and Wales consists of "specially designated" milk.

As regards the City, the Order involved no change in present procedure, no ungraded milk being sold now whilst as pointed out below, nearly all the

milk sold in Chichester is heat-treated (i.e. pasteurised).

Production and Distribution.

All milk sold in the City is retailed in bottles which have been previously washed and sterilised in the latest mechanical washers, and the bottles sub-

sequently fitted with overlapping aluminium foil caps.

Almost the whole of the milk sold in the City is pasteurised, and the remainder, which is sold raw, is from tuberculin-tested herds and bottled at the farm of production. The supplies of tuberculin-tested milk which are not bottled at the farm are pasteurised before sale and sold under the special designation "Tuberculin-Tested (Pasteurised)."

Dairy farms are registered by the Ministry of Agriculture and Fisheries, and the execution and enforcement of Regulations relating to the health of cattle and clean milk production are the responsibility of that Ministry.

Registration of dairies, other than dairy farms, and the control of distribution, remain the responsibility of the City Council. There are 3 registered dairies in the district, 2 being distribution depots, retailing milk (Tuberculin-

tested or Pasteurised) bottled elsewhere.

The Medical Officer of Health is responsible under the Milk and Dairies Regulations 1949-1954, for ensuring that no disease communicable to man is spread by cattle or personnel. *No action was necessary during the year* 1954 under Section 20 of the Regulations (restricting the sale of infected milk from registered premises).

Licensing.

Producers of Tuberculin-tested milk are licensed by the Ministry of Agriculture and Fisheries. Licences to pasteurize, originally the responsibility of the City Council, are now issued and control is exercised, by the West Sussex County Council as the Food and Drugs authority. There is one pasteurising plant in the City and frequent sampling of pasteurised milk produced at these premises is carried out by the County Council's sampling officers, who forward details of the results of laboratory examination of the milk to me. Dealers' licences in respect of the sale of designated milk in Chichester are issued by the City Council. The following licences were granted during 1954:—

(i) Under the Milk (Special Designation) (Raw Milk) Regulations 1949-1954.

Premises licensed for retailing "Tuberculin-tested" milk (licence expiring 31st December, 1954)

4

3

(ii) Under the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949-1953.

Premises licensed for retailing "Pasteurised" milk (licence expiring 31st December, 1954)

Sampling.

(a) Quality.

Samples of milk are taken by the County Council's sampling officers and submitted to the Public Analyst for examination as to conformity with the standards for milk fat, etc., laid down in the Sale of Milk Regulations.

(b) Cleanliness.

For ascertaining the cleanliness and keeping quality of milk, samples are submitted to the "Methylene Blue" Test.

(c) Pasteurisation.

Samples of pasteurised milk are subject to a Phosphatase Test. By this means, the efficiency of the pasteurisation treatment is checked (whether the

milk has been heated to the temperature and for the period necessary to destroy all pathogenic organisms). The subsequent addition of raw milk can also be detected by this test.

(d) Biological examination.

Regular sampling of milk, prior to heat treatment, is carried out by the City Council's sanitary inspectors at the processing plant in the City, and these samples submitted to laboratory examination for the presence of tubercle bacilli and brucella abortus. The results of such sampling during 1954 are included in the details of examination of milk samples set out below:

RESULT OF EXAMINATION OF MILK SAMPLES

A total of 258 samples of milk were collected and submitted for examination during the year; 181 were subjected to the Methylene Blue and Phosphatase Tests and were reported by the Pathologist to be satisfactory. Details are given below:—

No. of		Methylene Blue Test Phosphatase Test									
samples ex- amined	Pasteur- ised.	Tubercu- lin-Tested (Past.)	Channel Island (Past.)	School Milk (Past.)	Past- eurised	Tubercu- lin-Tested (Past.)	Channel Island (Past.)	School Milk (Past.)			
181	46	49	46	40	46	49	46	40			

77 samples of milk were subjected to biological examination, as under:-

No. of	Positive for Tubercle	Positive for Brucella	Negative (both tests)	% Pos	itive:
samples examined.	Bacilli.	Abortus.	(both tests)		Brucella Abortus
77	2	11	64	2.6	14.3

MEAT

The Government's decision to end meat rationing in July, 1954, and the resultant cessation of the meat and livestock control scheme, brought a return to private slaughtering and marketing of meat. Following publication of the Interim Report of the Interdepartmental Committee on Slaughterhouses, whose recommendations were almost entirely accepted by the Government, local authorities were asked, by consultation with local organisations representing both farmers and meat traders, to ensure that adequate slaughtering facilities would be available and that the distribution of home-killed meat would proceed smoothly when control by the Ministry of Food ended. At an informal meeting with City representatives of the meat trade, the position was fully explained. Contact was also made with other interested organisations and with neighbouring authorities, dependent on the output of slaughterhouses in the City for their meat supply.

The two slaughterhouses in the City formerly controlled directly by the Ministry of Food were returned to private ownership and licences under section 57, Food and Drugs Act, 1938 (as amended by section 3, Slaughterhouses Act, 1954) were granted, in one case for a period of 5 years and the other, for 13 months, subject in each instance to the carrying out of works required to bring the premises up to standard. Extensive alterations and improvements have now been completed at both premises and further work is in hand.

The Government has announced, as a long-term policy, its intention of bringing about a moderate concentration of slaughtering facilities throughout the country. By this is envisaged a number of public abattoirs, each serving a wide area, so that slaughtering facilities are concentrated and readily accessible.

As regards the City, slaughtering has been concentrated at two slaughter-houses for a number of years, the other smaller premises used for slaughtering before the war have now either been demolished, converted or closed. The two slaughterhouses in the City serve a very wide surrounding area, comprising Midhurst and Chichester Rural Districts and Bognor Regis Urban District and involving a winter population of some 106,500, whilst, in addition, meat is supplied to Portsmouth. Both ante- and post-mortem inspection is carried out of all animals slaughtered and, where necessary, veterinary advice is sought.

Killing takes place every Sunday, most Saturday afternoons and three nights per week. This has resulted in a great deal of overtime for the Sanitary Inspectors. There are proposals for increased slaughtering at the Green Lane Slaughterhouse, which will further increase the amount of inspection, and here again most of the kill will be exported to other areas.

The Slaughter of Animals Acts, 1933-1954.

The Slaughter of Animals (Amendment) Act, 1954, which came into force on 1st October, 1954, amended and extended existing legislation, particularly as regards the slaughter of horses and the licensing of slaughtermen. Regulations have also been made under the new Act for securing humane conditions and practices in connection with the slaughtering of animals at both slaughterhouses and knackers' yards, and dealing specially with the construction, layout and equipment of such premises and the treatment and slaughter of animals. Licences issued to slaughtermen must now specify the animals which may be slaughtered by the holder and the types of humane instrument to be used.

During the year 1954, 17 licences, expiring on 30th September, 1955, were granted under the new Act.

The total number of animals slaughtered during the year 1954 was 31,328, made up as follows:—

Slaughterhouse	Cattle (excluding Cows)	Cows	Calves	Sheep and Lambs	Pigs	Goats	Total
Stockbridge Road	2,956	1,795	4,475	8,266	4,766	5	22,263
Green Lane	-	_	8	1,410	7,647	_	9,065
TOTAL	2,956	1,795	4,483	9,676	12,413	5	31,328

This total shews an increase in the number of animals slaughtered of over 3,000 compared with the previous year.

CARCASES INSPECTED AND CONDEMNED

	Cattle (exclud-	Cows	Calves	Sheep Mand	Pigs	Goats
	ing Cows)			Lambs		
Number killed	2,956	1,795	4,483	9,676	12,413	5
Number inspected	2,956	1,795	4,483	9,676	12,413	5
All diseases except Tuberculosis						
Whole carcases condemned	I	5	3	16	19	_
Carcases of which some part or organ was condemned	818	563	10	252	3 60	_
Percentage of the number inspected affected with disease other than Tuber-culosis	27.71%	31.64%	0.29%	2.77%	3.05%	
Tuberculosis only						
Whole carcases condemned	4	13	I		10	
Carcases of which some part or organ was condemned	175	402	2		131	
Percentage of the number inspected affected with Tuberculosis	6.06%	23.12%	0.07%		1.14%	. –

Total amount of meat found to be diseased and destroyed, 25 tons, 5 cwt. 2 qrs., $15\frac{1}{2}$ lb., comprised as follows:—

	E	ntire (Carcas	ses		Joi	ints			Edible	Offa	1
0 441- (11	tons	. cwts.	qrs.	1ъ.	tons	cwts.	qrs.	1b.	tons	cwts.	qrs.	1b.
Cattle (excluding cows)	I	2	2	15	-	4	3	24	5	13	2	12
Cows	3	18	2	Ι2	I	2	2	16	8	15	o	$5\frac{1}{2}$
Calves		3	I	2	_	_	_	13		1	3	20
Sheep and Lambs		5	2	5	_		2	10	_	6	3	31/2
Pigs	I	11	О	10		3		26	I	15	2	91
TOTAL	7	I	0	16	I	11	2	5	16	12	3	221/2

CLEAN FOOD CAMPAIGN.

(a) Food Preparing Premises.

Much attention was directed during the year to the conditions under which food was prepared for sale in bakehouses, restaurants and hotel kitchens,

food factories and butchers' shops.

The need for scrupulous cleanliness at all times has been brought to the notice of the persons concerned and every effort has been made to facilitate this by the provision of constant hot and cold water, clean towels, wash basins and proper sanitary and toilet facilities.

In the main the efforts to improve the conditions under which food has been prepared have been most encouraging.

(b) Retail Food Shops (including Stalls and Vehicles)

The conditions under which food has been offered for sale during the year under review have maintained a high standard and it is pleasing to note that a number of shop-keepers are making use of refrigerated display cabinets for the sale of perishable food stuffs. These cabinets not only solve the fly problem but also protect the food from surface contamination, besides maintaining it in perfect condition.

(c) Statistics and general information.

In accordance with paragraph 7 of the Ministry of Health Circular 1/54, the following details are given concerning food premises, etc., in the City:—

(i)	Food premises classified	by	types:	_
. ,	Bakehouses		14	
	Bakers and confectioner	rs	30	
	Butchers		15	
	Cafes and restaurants		24	
	Dairies		3	
	Fish shops		9	(including 5 fish-frying premises)
	Factories (manufacture	of		
	preserved food)		I	
	Greengrocers		13	
	Grocery and provisions		64	
	Ice-cream		58	
	Licensed premises		66	
	-			

(ii) Registered food premises:—

- (a) Under section 92, Chichester Corporation Act, 1938.

 Preparation or manufacture of sausages,
 preserved, potted, etc., meat ... 21

 Manufacture and/or sale and storage of ice-cream 58
- (b) Under section 8, Milk and Dairies Regulations, 1949.

 Dairies 3
 Distributors 3 (1 wholesale)
 (2 retail)
- (iii) Inspections of registered food premises were carried out during the year as under:—

Manufactur	e of	sausages,	potted	or pres	served
food				• • •	6 o
Dairies		•••	•••	•••	32
Ice-cream n	nanufa	cture, stor	age and	sale	54

(iv) Educational activity.

In the course of my talks given during 1954 to various local organisations on public health matters, emphasis was laid on the importance of cleanliness in food handling and preparation. Regular routine inspections of food premises also afforded opportunities for guidance to local tradesmen on all aspects of food hygiene, and they have almost invariably shown themselves ready and willing to co-operate with the department in the maintenance of a high standard at their premises. Where measures aimed at improving any unsatisfactory conditions have been suggested, no difficulty has been experienced in securing compliance.

(v) Disposal of condemned food.

All condemned food is disposed of under the Department's supervision, at the Council's Refuse Tip.

(vi) Special examination of foodstuffs.

There were no cases during the year where special examination of a stock or consignment of food was found necessary as the result of the condemnation of unsound foodstuffs.

Other details concerning visits to food premises and the condemnation of foodstuffs are set out on subsequent pages of this Report.

ICE-CREAM.

At 31st December, 1954, the premises registered for the sale and/or manufacture of ice cream were as follows:—

Manufacture only	 I
Manufacture and Sale	 3
Storage only	 I
Sale only, of wrapped ice cream	 41
Sale only (no restrictions as to wrapping)	 12
	_
	58

There are now only two manufacturers in the City who regularly make

ice cream and in each case a complete 'Cold Mix' is used.

The stringent requirements of the Ice-Cream (Heat Treatment, etc.) Regulations make the manufacture of ice-cream by small producers an uneconomical proposition. Nearly all the ice-cream sold in the City is prepacked and produced by large manufacturing wholesalers.

During the year 17 samples of ice cream were taken and these were subjected to the Methylene Blue reduction test and graded as to the bacteriological cleanliness in accordance with the method recommended by the Ministry of Health and Public Health Laboratory Service.

The following table gives the results of samples taken:—

Number of Samples	Grade 1	Grade 2	Grade 3	Grade 4
17	12	5	_	_

In explanation of the above table it is suggested that if, out of the four grades recommended, ice cream consistently fails to reach Grades I and 2, it would be reasonable to regard this as indicating defects of manufacture,

or of handling, which call for further investigation.

The results of the examinations were, in every case communicated to the persons concerned. Numerous visits were made to the premises in which the ice cream was manufactured and the methods employed were thoroughly examined and advice given where appropriate. When an unsatisfactory result was received a thorough investigation was carried out and every endeavour was made to ascertain and rectify the fault in manufacture, storage or sale.

SECTION VI.

SANITARY CIRCUMSTANCES OF THE AREA

. WATER SUPPLY.

(i) SOURCES OF SUPPLY, TREATMENT AND SAMPLING RESULTS.

The public water supply to the City, derived from the Corporation's wells, boreholes and adits at Fishbourne and Funtington, has been satisfactory, both in quality and in quantity, throughout the year. There is no tendency towards plumbo-solvent action.

Apart from the supply of water to premises in the City, water is also supplied by public mains to a number of parishes in the Chichester Rural District, and in bulk to the Selsey Water Company, for distribution by that

undertaking.

The raw water underwent a continuous process of purification before being pumped either directly into the distribution system or into the storage reservoir

at Lavant.

At the Funtington Waterworks, where the raw water is of a uniformly high standard, the treatment consisted in the application of the minimum quantities of Chlorine and Ammonia to ensure a normal Chloramine residual

in the distribution system.

At the Fishbourne Waterworks the treatment consisted in the application of a comparatively large dose of Chlorine (one part per million) followed, after a brief contact period, firstly by Sulphur Dioxide (a dechlorinating agent) and secondly by Ammonia, in quantities sufficient to leave a normal Chloramine residual in the water. This system of treatment at Fishbourne, which was introduced in December, 1953, has operated successfully throughout the year. It has provided increased protection against the possibility of abnormal pollution of the raw water, and has resulted in a decrease in the number of complaints of taste in the water.

Samples of raw and treated water were collected at regular intervals luring the year and submitted to the Counties Public Health Laboratories, London, for examination. The results as summarised by the Water Engineer

and Manager, Mr. A. N. Burgess, are appended below.

Funtington Source.

Twenty-six samples of Funtington raw water were submitted for bacteriological examination. Bacillus Coli was absent in all samples, and only two

samples contained organisms of the coli-aerogenes group.

One sample of raw water analysed chemically had a total hardness of 210 p.p.m. of which 20 parts were non-carbonate or permanent hardness. The sample was practically clear and bright in appearance, neutral in reaction, free from iron and other metals, and contained no excess of salinity or mineral constituents in solution.

Fishbourne Source.

Twenty-six samples of Fishbourne raw water were submitted for bacteriological examination. Organisms of the coli-aerogenes group were present in

seventeen samples, ten of which contained Bacillus Coli, Type 1.

One sample of raw water analysed chemically had a total hardness of 250 p.p.m. of which 40 parts were non-carbonate or permanent hardness. The sample was practically clear and bright in appearance, neutral in reaction, free from iron and other metals and contained no excess of salinity or mineral constituents in solution.

Tap Water.

Twenty-six samples of treated water from consumer's premises (eleven in the City and fifteen in the Rural District) and twenty-six samples from the Fishbourne delivery main were submitted for bacteriological examination. Bacillus Coli and coli-aerogenes were absent in all samples, and the Analysts reported that the water as supplied was wholesome in character and suitable for drinking and domestic purposes.

One sample of tap water analysed chemically had similar characteristics to the raw water samples and it was described by the Analysts as being of the

highest standard of organic quality.

(ii) STAFF.

All workmen employed in the Water Department are submitted to the appropriate medical tests at the time of engagement, and annually thereafter.

(iii) HOUSES AND POPULATION SUPPLIED FROM THE PUBLIC WATER MAINS.

During the year, 342 premises were connected to the public water mains, 114 being in the City area and 228 in Chichester Rural District.

The number of dwelling houses in the City, and the population supplied from the public water mains and privately supplied, is as follows:—

	Supply			No. of inhabited dwelling houses	Estimated Population
(a)	Public water mains—direct	to ho	uses	5,302	18,98 o
(b)	Public water mains—by me pipes	ans o	of stand		
(c)	Balance privately supplied	•••	••	. 8	30
			Total	5,310	19,010

(iv) HOUSES NOT ON MAINS SUPPLY OF WATER.

7 samples of water were taken during the year from houses not connected to the public water supply and warning letters were sent to the occupiers from which unsatisfactory samples were taken.

There is very little prospect of providing these isolated premises with a piped supply of town's water until the public mains are extended to their respective areas.

2. DRAINAGE AND SEWERAGE.

Chichester is drained as far as possible on the separate system of main drainage (i.e. rain water is drained separately from soil water) the Sewage Disposal Works being situated at Apuldram, 2½ miles to the South West from Chichester Cross.

3. CLOSET ACCOMMODATION.

Water closets form the chief method of disposal.

There are at the moment approximately 150 houses within the City boundary with cesspool drainage.

4. PUBLIC CLEANSING.

Scavenging is carried out daily in the main streets. House refuse is collected weekly by the Corporation and taken to the refuse tip situated on the outskirts of the City.

The City Council has a modern cesspool emptying vehicle for service in the City and the contents are disposed of at the Sewage Works. Cesspools are emptied on application.

5. PUBLIC BATHS.

It was stated in my report for 1951 that the scheme for erection of Slipper Baths (3 male and 3 female) on a site at the junction of Alexandra Terrace and St. Pancras had unfortunately to be deferred in view of the restrictions by the Government on all building other than housing. Early in 1953 a fresh approach for Ministerial sanction for the scheme resulted in a favourable reply from the Ministry of Housing and Local Government. Steps were accordingly taken to proceed with the preliminary arrangements but, after careful consideration of the running costs (in this respect, guidance was obtained from information supplied by other authorities operating such a service) and particularly of the estimated amount to be found from the General Rate Fund each year, together with the probably diminishing use of the Slipper Baths as more new houses (with baths) were provided, the Council reluctantly decided not to proceed further with the proposal.

6. SMOKE ABATEMENT.

Several complaints were received, mostly of a minor character, the cause was almost exclusively due to the allocation of grades of fuel for which the apparatus was not designed. 9 inspections were made during the year in connection with smoke nuisances.

7. CAMPING SITES AND MOVABLE DWELLINGS.

There are no camping sites in the City licensed for regular use. During the year, 4 applications for licences under section 269, Public Health Act, 1936, were received, 2 in respect of individual sites and 2 for the vehicles to be stationed thereon. All were approved.

2 visits were made in connection with these applications.

8. OFFENSIVE TRADES.

The offensive trades in the City include:-

One Fellmonger.

Three Rag and Bone dealers.

No nuisances were reported regarding these trades.

9. SHOPS.

Routine inspections are carried out by the Additional Sanitary Inspector and the Shops' Inspector (part-time), working under the supervision of the Chief Officers of the department.

10. DOMESTIC SERVANTS REGISTRY OFFICES.

There are two Domestic Servants Regist^ry Offices in the City and 5 visits were made during the year under review. No complaints were received.

11. HOUSES LET IN LODGINGS.

There are no houses let in lodgings registered in the district.

12. COMMON LODGING HOUSES.

There is one Common Lodging House in the City with accommodation for 24 beds. Periodical routine visits were made to the premises during the year.

13. PUBLIC MORTUARY.

A Public Mortuary situated in Spitalfield Lane is maintained by the Corporation and facilities are available for the holding of post mortem examinations.

An agreement exists between the Corporation and the Chichester Rural District Council for the reception of bodies from their area.

During the year 1954, 53 bodies were admitted as follows:—

	Reason for	Total	
	 Awaiting Burial	Post Mortem	Total
Chichester City	 5	19	24
Chichester R.D.C.	 2	27	29
Total	 7	46	53

14. BYE-LAWS.

List of Bye-Laws in force in the City which relate to Public Health:-

				Date of
Numbe	r Description			Confirmation
I	New Streets and Buildings			April, 1936
2	Common Lodging Houses			May, 1936
3	Markets	•••	• • • •	May, 1936
4	Mortuary	•••	•••	May, 1936
4 5 6	Nuisances	•••	•••	May, 1936
_	Offensive Trades	• • •	•••	May, 1936
7 8	Slaughterhouses	•••	• • •	May, 1936
	Sanitary Conveniences	•••	•••	June, 1936
9	Dogs fouling footway	•••	• • •	October, 1936
10	Houses let in lodgings	•••	• • •	June, 1937
II	Buildings	•••	•••	February, 1939
12	Pleasure Fairs	•••	•••	February, 1939
13	Houses let in lodgings	•••	• • •	May, 1939
14	Refuse Tips	•••	• • •	October, 1939
15	Water—Prevention of waste			
	Misuse or Contamination			March, 1950
16	Handling, Wrapping and I		of Fo	ood and
	Sale of Food in the Open	Air	• • •	July, 1950
17	Buildings	•••	•••	, , , , ,
18	Deposit of Litter			September, 1954
19	Parking of Cars on Grass	Verges	and	Traffic
	Islands		•••	September, 1954

SANITARY INSPECTION OF THE AREA.

The following is a summary of the visits and inspections, etc., carried out by the Chief Sanitary Inspector and his Assistants during the year:

PURLIC HEALTH AND HOUSING ACTS

1.	PUBLIC HEALTH AND HOUS	SING	ACTS.		
	No. of complaints received		•••		177
	Inspections and re-inspection	18			656
					3
2.	HOUSING MANAGEMENT.				
	Visits (Housing Application)		•••	•••	350
	, , ,				33
3.	FACTORIES ACT.				
	Factories		•••		226
	Bakehouses				51
4.	MILK AND DAIRIES.				
	Dairies				32
-5.	FOODSTUFFS.				
	Ice Cream Vendors and Man	ufactı	irers		54
	Ice Cream sampling				17
	Examination of unsound foo	d	•••		82
	The following unsound food was con	demn	ed during 1	954 :	
Co	ordials etc '4 botts, and tins	Ham	-Tinned	1 cwt	. 1 qr. 13 lbs. 4½ozs.
Fi	sh—Dry:—	Jam, J	Marmalade,	etc	128 tins and jars
	Cod (Smoked) 2 stones, 18 lbs. Kippers 3 stone	Milk—	–Tinned var -tinned	·····	239 tins 241 tins
Fi	ish—Wet:—	Pickle	s and Sauce ngs	s	14 botts, and jars
	Escallops 120	Sausa	ges		IO OZS.
FH	Haddock 1 stone sh—Tinned 52 tins		etti		68 tins 33 tins
			ables—tinne		
	Commerce of visite and inspections		and a	4 h 41	o Chief Couite
Ir	Summary of visits and inspections aspector and his Assistants (continued	i):	carned of	п ву п	ie Chief Samtary
		-, -			
6.	MEAT.				
	Government Slaughterhouse	:S			558
	72 / 1 Lat				60
	•				
	The following unsound food was co	onden	ined at Bu	itchers'	Shops:—
В	eef—Home killed 257 lbs.		-Imported		34 lbs.
	nported Beef 31 lbs. ork—Home killed 175¾ lbs.		Maws—Imp d Meat—In		$3,726\frac{1}{2}$ lbs. 50 lbs.
	704				
7.	. SHOP ACTS.				
	Visits				66g

8.	EMPLOYM		OUNG	PERSO	NS' A	CTS.		
	Visits	•••	•••	•••	•••	•••	307	
9.	WATER SU Wate	U PPLY. r Sampling		•••	•••	•••	7	
10.	OFFENSI	VE TRADE	S.					
10.		ections		•••	•••	•••	10	
11.		OUS DISEA ral Visits	SE 		•••	•••	21	
12.		PREMIS pections	ES. 	•••		•••	20	
13.	RODENT	CONTROL	(Statist	ics for th	ne T2 mc	nths en	ding 21/2/	55) •
10.		e Infestati	•	101 11	12 1110	onens en	J1/J	33) .
	(i)	Number of		inspecte	ed follow	ing noti	fication	
	· · ·		rvey pur					251
	(įi)	Number of for roder under Fo	it infestat	ion duri	ng routi	ine visit	s made	469
	(iii)	Total num		_				409
	()		e				(-)	1190
	(iv)	Number of						
			private business			•••	•••	194
			: Corpora					8
		(d) At	farms	•••	•••	•••	•••	I
	(b) Sewer	s.				To	tal	239
	,	Number of	treatmen	nts (inclu	ıding 10	% ann	ual test)	3 68
		Number of Number sh			kes	•••	•••	18
		(These were				no take	es being	
			during the equently				carried	
14.	DISINFE	CTION AN	D DISI	NFESTA	ATION.			
	Number of					out:-	-	1
	NT 1	After infec				od ord		10
		f Disinfesta ed Bugs.	tion Ir	eatment	s carri	eu out	.—	
	(i)	Council Ho	uses		•••	•••		-
	(ii)	Other prem	ises	•••	•••	•••	•••	1
	(b) O :	ther Vermi	n.				Total	1
	(i)	Council hor	ises		•••	•••		6
	(ii)	Other prem	ises		•••	•••	•••	II
							Total	17

FACTORIES ACTS, 1937 and 1948

INSPECTIONS

	Number of						
Premises	Inspections	Written Notices	Occupiers Prosecuted				
Factories with mechanical power	127	2	_				
Factories without mechanical power Other premises under the Act (including works of building and engineering construction but not including out-	82	6	-				
workers' premises)	17	_	_				
Тотаі,	226	8	_				

DEFECTS FOUND

		Number of defects in			
Particulars	Found	Remedied	To H.M. Inspector	By H.M. Inspector	respect of which Pro- secutions were Instituted
Want of cleanliness (S.1)		_		_	_
Overcrowding (S.2)	_	_		_	
Unreasonable temperature (S.3) Inadequate ventilation (S.4)	_	_	_	_	_
Ineffective drainage of floors (S.6)	_	_	_	_	_
Sanitary Conveniences (S.7): (a) Insufficient (b) Unsuitable or defective	I	I	_	k . -	_
(c) Not separate for sexes		1 _1			_
Other offences (not including offences relating to Home-					
work)	_	_	_	_	
TOTAL	2	2	_	I	_

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